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COUNTY BOROUGH OF BOURNEMOUTH

Annual Report

of the

Medical Officer of Health

and

Principal School Medical Officer

For the Year 1969

PUBLIC HEALTH DEPARTMENT,

17 St. Stephen's Road,

BOURNEMOUTH

Telephone Bournemouth 22066





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Medical Officer of Health for the Year 1969

Public Health Department, 17 St. Stephen's Road, Bournemouth.

To the Mayor, Aldermen, and Councillors of the County Borough of Bournemouth

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth for the year 1969, the ninety-first of the series.

Vital Statistics

The Registrar-General's mid-year estimate of population showed a decline in population from 151,460 to 149,820, and this latter figure forms the basis of the vital statistics that follow.

A total of 1,550 live births were registered, representing a birth rate of 10·35 per 1,000 population, compared with 1,721 live births and a birth rate of 11·36 per 1,000 population in 1968. This must be one of the lowest birth rates ever recorded in Bournemouth and the decline since 1968 is even more pronounced here than in England and Wales as a whole. Included in the Bournemouth total were 232 illegitimate births (15%).

Stillbirths numbered 25, or 15.87 per 1,000 births, rather higher than the national average.

Twenty-five infants died before their first birthday, compared with twenty-six in 1968 but owing to the smaller number of births

the infant mortality rate rose from 15·11 per 1,000 live births to 16·13 per 1,000 live births. The national average is rather higher than this, 18·0 per 1,000 live births. Eight of the twenty-five infants died before they were a week old.

There were 2,714 registered deaths, compared with 2,731 in 1968, giving an adjusted death rate (adjusted according to the Registrar-General's formula to take into account the composition of the population) of 11.05 per 1,000 population, compared with 11.0 per 1,000 of population in the previous year.

There were no maternal deaths.

Notifiable Infectious Diseases

There were no epidemics of notifiable infectious disease and no individual cases of a serious nature. The contagious skin disease Scabies, which is locally notifiable, showed an increased incidence, from 28 cases in 1968 to 55 cases in 1969 and active measures were introduced to halt its progress.

Tuberculosis

There were 30 new cases of pulmonary tuberculosis compared with 36 in the previous year, and cases of non-pulmonary tuberculosis similarly declined from 6 to 2. During 1969 there were 27 inward transfers of persons known to be suffering from tuberculosis who came to live in the Borough and they remained under the surveillance of the Chest Clinic.

Maternity and Child Welfare

During the autumn an experimental project substituting an appointment-controlled Developmental Assessment Clinic for the traditional type open Infant Welfare Clinic was inaugurated at Winton and Pokesdown and proved an unqualified success. During 1970 this form of supervision will be extended throughout the Borough and will concentrate on the developmental progress of infants and young children, physically, mentally and emotionally, leaving the family doctors to treat infants who are ill, or are experiencing feeding problems.

The efficiency of the vaccinations and immunisations has been greatly increased by computerisation of the records and practically

all the family doctors in the Borough now have their appointments arranged through this system.

Financial support was continued to the Free Church Council's Mother and Baby Home at 11 St. Alban's Avenue and to St. Thomas' Lodge, Charminster Road, and in addition the Social Services Committee made individual grants to a number of unmarried mothers whose confinements took place outside the Borough.

The Corporation Day Nursery at 10 Wellington Road was transferred to premises at 79 Lansdowne Road, purchased and adapted by the General Post Office in return for the former nursery premises which were required for post office extensions. The new Nursery gave slightly larger accommodation and facilitated family groupings among the toddler section. In addition, there were 17 persons and 21 private nurseries registered under the Nurseries' and Child Minders' (Regulation) Act, 1948, as amended, but all the nurseries provided only accommodation for children over the age of two years.

The Domiciliary Services of the Corporation

The decline in home confinements has continued, and it is the opinion of many authorities that all confinements should be and ultimately will be undertaken in hospitals, even though the mother and baby return home within a day or two. Preliminary meetings have already been held at the Royal Victoria Hospital into the possibility of developing a short stay General Practitioner Maternity Unit where deliveries would be undertaken by the Corporation's midwives and ancillary staff provided by the hospital.

The remaining domiciliary services were fully extended throughout the year, the health visiting service in particular being short staffed, so that not only were no further general practitioner attachments possible, but some dilution proved necessary in order to carry on existing commitments.

The same difficulty in staff recruitment affected the Domestic Help Service, and only in the case of the Home Nursing Service and the Domiciliary Midwifery Service was the establishment maintained.

The Ambulance Service

The number of patients carried by the Ambulance Service fell back slightly from the peak of 1968, though the centralisation of

specialist hospital departments was responsible for a small increase in the total mileage. The training of ambulance personnel continued through the Ambulance Training School at Bishop's Waltham and by local arrangement.

Vaccination and Immunisation

Arrangements for vaccination and immunisation of children up to the age of leaving school continued under existing arrangements though a shortage of measles vaccine led to a curtailment of the programme, and a consequent rise in the incidence of this disease. The Department continued to provide vaccination against Yellow Fever for travellers through certain tropical areas.

Mental Health Services

Admissions to mental hospitals continued at much the same level as in 1968, but relapses and re-admissions accounted for an appreciable part of the total. Although the social worker staff of the Department was seriously undermanned, it seems unlikely that more intensive after-care would completely solve the problem though it might reduce it considerably, and every effort should be made to recruit or train the necessary staff.

A third hostel, "Leven House", was opened during the year and the staff of the hostels are to be congratulated on the excellent work they have done in rehabilitating former hospital patients, in spite of continual staffing problems.

Sanitary Circumstances, Housing and Inspection of Food

Mr. G. A. Morgan, your Chief Public Health Inspector, has reported in detail on these aspects of environmental hygiene, which have such an important bearing on the health and prosperity of a major holiday resort. Food hygiene, the inspection of houses in multiple occupation, and of premises under the Offices, Shops and Railway Premises Act, 1963, have occupied his Inspectors' time to a considerable extent, but the full range of their activities can only be appreciated by a perusal of the report.

It remains for me to thank the Chairman and members of the Social Services Committee and the former Health Committee for their help and encouragement during the year.

My thanks are also due to my Deputy, Dr. J. G. Meadows, to Mr. J. W. Roberts, my Chief Administrative Assistant, and to all my staff for their loyal co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

WILLIAM FIELDING.

Health Committee and Staff

as at 31st December, 1969

SOCIAL SERVICES (HEALTH) COMMITTEE

The Mayor (Councillor B. E. D. Beckett)
Alderman P. G. Templeman, C.B.E. (Chairman)
Alderman Mrs. B. Bicknell, J.P., O.St.J. (Vice-Chairman)

	C. M. Pardy	Councillor	Mrs. P. M. Hogarth,
Alderman	Mrs. M. C. Wall		M.C.S.P.
Councillo	r F. H. Beale, M.A.	,,	J. W. Holloway, A.T.I.I.
,,	E. N. Day, A.L.C.M.,	,,	Mrs. S. E. McQueen
	A.C.P.		Mrs. D. Miller
,,	Major B. G. Dillon	,,	A. E. Ross
,,	M. H. Filer, A.C.A.,		J. A. Selvidge
	A.T.I.I.	,,	R. R. Taylor
,,	Mrs. P. M. Haley, S.R.N.		

PUBLIC HEALTH DEPARTMENT

Medical Officer of Health, Principal School Medical Officer, Medical Referee to Cremation Authority	William Fielding, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health, Deputy Principal School Medical Officer, Deputy Medical Referee to Cremation Authority	John G. Meadows, M.B., Ch.B., D.P.H.
Medical Officer in Department (Senior), School Medical Officer	Pauline K. H. Keating, L.R.C.S.(I). L.R.C.P.(I), L.M., D.C.H.
Medical Officers in Department, School Medical Officers	J. J. Phillips, M.B., Ch.B. Annette S. Raikes, L.R.C.P., M.R.C.S.
Principal Dental Officer	Mrs. M. B. Redfern, L.D.S.
Dental Officers	F. E. Lockwood, B.D.S. J. M. B. Ludford, L.D.S., R.C.S. 1 Vacancy
Dental Surgery Assistants	Miss H. Allen, Mrs. J. B. Bullen, Mrs. C. A. Ferris, Miss F. R. Hickmott
Chief Public Health Inspector	G. A. Morgan, B.E.M., M.R.S.H.
Deputy Chief Public Health Inspector	A. R. Hutt

A. R. Hutt
H. R. Ambrose
H. B. Frost
A. J. Heslop
N. Jacobs
B. W. Kirkton
A. J. Mortimer
W. C. R. Jewell

Superintendent of Public Conveniences and Mortuary ...

District Public Health Inspectors

Rodent Officer Chief Nursing Officer and Non- Medical Supervisor of Midwiyes	P. L. J. Sibley Miss L. E. Roberts
Medical Supervisor of Midwives Deputy Chief Nursing Officer (Health Visiting) Health Visitors	Miss G. F. Grace Miss K. H. Beaumont, Miss D. E. Blundstone, Mrs. E. R. Bond, Mrs. M. Carley, Mrs. D. M. Clark, Miss F. Darlington, Miss M. H. Dutton, Mrs. B. Geach, Miss A. Johnson, Miss A. D. Lane, Mrs. S. M. Money-Kyrle, Miss J. Mulligan, Miss M. C. Parnham, Miss M. Peakman, Mrs. J. Price, Miss M. Routh, Miss M. R. Y. Smith, Miss G. F. Thomas, Miss A. R. Thornton, Mrs. E. Wall, Miss E. M. P. Ward, Mrs. J. Wilkinson, 8 Vacancies.
Municipal Midwives	Mrs. E. Atha, Miss B. McBride, Mrs. M. Plank, Miss L. J. M. Redpath, Miss C. D. Reid, Miss E. M. Schoch.
Deputy Chief Nursing Officer (Home Nursing)	Vacancy
Home Nurses,	Mrs. A. V. L. Banyard, Mrs. J. F. Bilton, Mrs. D. M. Chapman, Miss D. G. Collier, Miss V. W. Conroy, Mrs. C. D. Crumpton, Miss E. P. Gilbert, Mrs. E. R. Guscott, Miss M. M. L. Hemmi, Miss C. A. Hibberd, Miss B. Jackson, Miss T. M. Jones, Miss H. Kulling, Miss P. G. Lacey, Mrs. C. Langley, Mrs. M. S. McKenney, Miss J. I. Neagle, Mrs. R. J. K. Nicholls, Miss B. M. Rendle, Mrs. F. Russell, Miss E. E. Souter, Mrs. G. Tedeschi, Miss D. Telfer, Miss J. K. Tolley, Miss D. E. Welch.
Matron, Day Nursery	Miss D. M. Hine
Home Help Organiser Assistant Home Help Organisers	Mrs. R. Watts Miss I. M. Clements, Mrs N. Ullithorne
Head Social Worker	H. S. Lovejoy
Mental Welfare Officers/Social Workers	Miss P. J. Ash, A. F. Pallett, H. J. R. Lambert, Miss E. A. P. Slater, R. Smith.
Junior Training Centre	Supervisor Mrs. K. M. Reeves Assistant Supervisors Mrs. E. M. Barker, Mrs. E. Robson, Mrs. L. R. Tarrant, Mrs. B. M. Wall.

Adult Training Centre	Manager T. C. Burn Instructors C. R. Ashley, J. Malins, Mrs. G. M. Nott, S. Nott, Miss B. Usher.
Chief Administrative Assistant	J. W. Roberts
Senior Administrative Assistant	H. V. Humberston
Administrative Assistants	F. J. Goode, E. M. Goodman, D. W. T. Hall, C. Lockett, P. N. Loweth, S. Murphy.
Secretary to Medical Officer of	
Health	Mrs. B. J. Spark
Clerks	Mrs. E. M. Barnes, H. R. Bryan, K. F. Clarke, W. A. Hamer, Mrs. S. M. King, Miss M. McGovern, Mrs. I. E. J. Matthews, Mrs. M. E. Mead, Mrs. I. Murphy, Miss S. R. Norman, J. W. Peake, Mrs. M. A. Reeve, R. W. Rowe, G. Spark, S. G. Tarrant, Miss Y. P. Tooze, C. D. Watts, W. Wheeldon.
Ambulance Officer	D. M. Cook
Health Education Officer	C. N. Gumbley
Chiropodist	B. S. Brodie
PART-TIN Senior Medical Officer for Mental Health	TE OFFICERS C. J. H. Williams, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M.
Public Analyst	H. Dedicoat, F.R.I.C.

General Statistics

Area of the County Borough				11,627 acres
Estimated Civilian Population-	-Mid	Year	1969	149,820
Census Population, 1961	• •			154,296
Rateable Value at 1.4.69				£10,548,049
Product of 1d. rate, 1969/70				£43,007

Vital Statistics

Live Births { Male Legitimate 683, Illegitimate 122 } Female ,, 635, ,, 110 } ,, 85% ,, 15%			1550
Birth rate (per 1,000 population)			10.35
Stillbirths { Male Legitimate 8, Illegitimate 3 }	• •	• •	25
Stillbirth rate (per 1,000 total live and still births)			15.87
Total Deaths (Males 1219, Females 1495)	• •		2714
Death Rate (per 1,000 population)			18.12
Adjusted Death Rate (per 1,000 population)			11.05
Maternal Deaths			Nil
Maternal Mortality Rate (per 1,000 total births)			Nil
Number of deaths of infants (under 1 year of age):— Legitimate 20, Illegitimate 5		• •	25
Infant Mortality Rate (per 1,000 live births) (Legitimate 15·17, Illegitimate 21·55)			16.13
Number of Neo-natal Deaths (under 4 weeks of age)			15
Neo-natal Mortality Rate (per 1,000 live births)			9.68
Number of Early Neo-natal Deaths (under 1 week of age)			8
Early Neo-natal Mortality Rate (per 1,000 live births)			5.16
Number of Perinatal Deaths (Stillbirths and deaths under 1	week	of	22
Age)	• •	• •	33
Perinatal Mortality Rate (per 1,000 live and still births)		• •	20·95
Deaths from Whooping Cough, all ages	• •	• •	Nil
Deaths from Measles, all ages	• •	• •	Nil
Deaths from Pulmonary Tuberculosis		• •	1
Death rate from Pulmonary Tuberculosis (per 1,000 populat	ion)	• •	0.007
Deaths from Non-Pulmonary Tuberculosis			1
Death rate from Non-Pulmonary Tuberculosis (per 1,000 p	opulat	ion)	0.007
Deaths from Cancer (Males 290, Females 284)	• •		574
Death rate from Cancer (per 1,000 population)			3.83

Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1,550, a decrease of 171 on the total for 1968. The birth rate was 10.35 per 1,000 population, one of the lowest if not the lowest ever recorded in the Borough and further evidence of the inexorable shift of population from the younger towards the older age groups.

Births in 1969 Birth rate, 1969 Birth rate, England and Wales,	 1969	• • • • • • • • • • • • • • • • • • • •	1,550 10·35 per 1,000 population 16·3 per 1,000 population
Over the ten year period, 1959	-1968	, stati	istics were as follows:—
Average number of births, 1959 Average birth rate, 1959–68	9–68	• •	1,811 12·11 per 1,000 population

Stillbirths

There were 25 stillbirths in 1969 compared with 17 in 1968, the majority of them occurring in hospital practice. The rate for 1969 was 15.87 compared with 9.78 in 1968.

Average number of stillbirths 1959–68	25
Stillbirths in 1969	25
Average stillbirth rate, 1959–68	13.58 per 1,000 total births
Stillbirth rate, 1969	15.87 per 1,000 total births
Stillbirth rate, England and Wales, 1969	13.0 per 1,000 total births

Illegitimate Births

Illegitimate births accounted for 15% of the total, the same as in 1968.

Prematurity

During the year 94 premature births were notified, 6% of the total and 55 fewer than in 1968. There is no obvious explanation for this surprising reduction, and all but one of the births occurred in hospital and included 8 stillbirths.

	Live	Stillborn	Total
Born at home or in Nursing	1		1
Homes Born in Hospital	85	8	93
	86	8	94

Infant Mortality

Twenty-five infants died before their first birthday, one less than in 1968, and the infant mortality rate was 16.13 per 1,000 live births compared with the national average of 18.0 per 1,000 live births.

Eight of the twenty-five infants died before they were a week old, five from congenital abnormalities.

Of the remaining seventeen babies who survived the neonatal period, five died from congenital abnormalities, four from birth injuries and eight from other causes.

Maternal Mortality

There was no death during the year associated with pregnancy.

1	PREMATURE	201710	Born	at home or in a nursing	1					
	PREM		Bc	in hos- pital	2	4	2	,		∞
		ore		in 7 and under 28 days						
	me	rred to or bef day	Died	in 1 and under 7 days		_				
	sing ho	Transferred to hospital on or before 28th day		with- in 24 hours of birth						
	Born at home or in a nursing home	hos		Total						
IRTHS	ome or	at		in 7 and under 28 days						
PREMATURE LIVE BIRTHS	rn at ho	Nursed entirely at home or in a nursing home	Died	in 1 and under 7 days						
IATURE	Bo	ursed entirely home or in a nursing home		with- in 24 hours of birth						
PREM		Z		Total births				1		-
				in 7 and under 28 days					1	
	1 .5	ital	Died	in 1 and under 7 days						_
	Rorn in	hospital		with- in 24 hours of birth	2	1	1		poming	4
				Total births	4	9	16	14	45	85
	Weight at birth				2 lb. 3 oz. or less	Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	Total

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1969

	A 11		1.	_	1.5	25	25	1.5		1.5	
Causas of Dooth	All	0-	- 1-	- 5-	- 15-	- 25	-35-	- 45-	- 55-	- 65-	- 75
Causes of Death	Ages										
Causes	2714	25	9	7	17	13	27	96	312	699	1500
teritis and other diarrhoeal	2/14	25	3	'	1 /	13	1 21	90	312	099	1509
diagona.	4	3							1		
I la sia a a a mina ta a sa	1								1		1
berculosis, respiratory berculosis, other, inc. late effects	1									1	1
labilio .	1 1	• •	1						1	1	
ther infective and parasitic	1	• •	• •		1				1		• •
1'	3		1								
Alignant Neoplasm, Buccal	3		1			• •					2
	9							1		1 2	
)			••				1		3	5
Illignant neoplasm —	12				1				1 2	1 2	
Desophagus	55	• •			1			1	3	2	10
	92		• •		1		1 . ;		9	26	18
llignant neoplasm — intestine	2		• •				2	2	12	35	41
alignant neoplasm — larynx	4						• •			2	
ılignant neoplasm — lung,	151							1.0	20	1	20
pronchus	151			• •		• •		10	39	63	39
llignant neoplasm — breast	60			• •	• •		• •	7	16	18	19
ilignant neoplasm — uterus	22	• •				1		4	4	4	9
ulignant neoplasm — Prostate	23			• •	•:				1	6	16
Lakaemia	12			• :	1				3	5	3
ner malignant neoplasms	136			2	. :	2	4	10	19	53	46
nign and unspecified neoplasms	5				2				1	2	
abetes mellitus	19								4	3	12
ner endocrine etc. diseases	6						1	1	1	1	2
aemias	6								1	1	4
ner diseases of blood, etc	3						1				2
ental disorders	6				1	1		1			3
ner diseases of nervous system,								ĺ			
atc	18	1		1	3	1		1	3	1	7
ronic rheumatic heart disease	17							1	5	6	5
pertensive disease	45						1		5	18	21
haemic heart disease	708	1					4	24	84	202	393
ner forms of heart disease	191							2	2	24	163
cebrovascular disease	426			1			2	5	31	70	317
ner diseases of circulatory											
ystem	116							1	14	30	71
uenza	10				1		1		2	2	4
umonia	180	1					2	3	7	36	131
onchitis and emphysema	109							3	14	39	53
hma	7				1			1	2	1	2
ner diseases of respiratory											_
ystem	22	1	1					1	4	5	10
ptic ulcer	20								1	6	13
pendicitis	2									ĭ	1
estinal obstruction and hernia	16	1					1		3	$\hat{2}$	9
rhosis of liver	7		1					2	3	$\frac{1}{2}$	
her diseases of digestive system	28			1		1	i	$\frac{1}{2}$	2	5	16
ohritis and nephrosis	9					_	1		3	4	2
perplasia of prostate	6								3	$\frac{7}{2}$	4
ler diseases, genito-urinary						• •		• •	• •		7
ystem	18						1		1	2	14
eases of musculo-skeletal			• •			• •	1	• •	1	2	14
ystem	7							1	2	2	2
agenital anomalies	15	10	1	1	• •	* *	• •	1	2	1	2
th injury, difficult labour, etc.	4	4	_		• •	• •		1	• •	1	1
ter causes of perinatal mortality	3	3	• •	• •	• •		• •	• •		• •	
nptoms and ill-defined conditions	8		• •	• •	• •	• •	• •	• •	• •	• •	
tor vehicle accidents	20	• •	2	• •	3	2	1				8
other accidents	46	• •	$\frac{2}{3}$	1	3	2	4	3		2	4
cide and self-inflicted injuries.	17	• •	3	1	1	2	• •		6	5	27
other external causes	10	• •	1	• •	$\frac{1}{2}$	2		6	2	5	1
· · · · · · · · · · · · · · · · · · ·	10	• •	1	• •	2	1	2	1	1	1	1
	1										

DEATHS FROM PRINCIPAL CAUSES, 1969

There were 2,714 deaths of Bournemouth residents in 1969, 17 fewer than in the previous year, but the adjusted death rate rose slightly from 11.0 to 11.05 per 1,000 population. The age distribution of deaths was as follows:—

<i>Age</i> 75+65-75	Percentage 55.6
55-65	25·8 11·5
45–55 35–45	3·5 1·0
25–35 15–25	0·5 0·6
0–15	1.5
	100.0

The main causes of mortality remained unchanged :—

Cause Of death	Number of deaths
Heart disease	916
Diseases of the arteries and circulatory system	542
Malignant disease (including leukaemia)	436
Diseases of the lungs (excluding Tuberculosis)	328
Deaths from violence (including suicide)	83

but there was a significant increase in deaths from cancer of the lung (119 to 151) and in deaths from violence (61 to 83). Cancer of the lung now accounts for over a third of all cancer deaths, and as it is one of the few types of cancer whose causation is known and can be prevented it is a matter for great concern that health education has been able to make such little impact on the problem. The same consumer resistance is found when advice is given about the evil effects of alcohol and drugs as well as tobacco and far from being able to prevent the beginning of the habit, it seems doubtful whether many addicts really want to be cured.

As regards deaths from violence, the biggest increase was in the miscellaneous group "all other accidents" where the number of deaths increased from 27 to 46. This group excludes motor vehicle accidents but includes all cases of accidental death in the home, together with fatalities resulting from a wide variety of other mishaps outside. As will be seen from the statistics, a very high proportion of these accidental deaths involved people over the age of 75 years.

Notifiable Infectious Diseases, 1969

There were no cases of poliomyelitis, diphtheria, meningococcal infections, acute encephalitis, typhoid or paratyphoid fever, ophthalmia neonatorium, erysipelas or malaria during 1969, but there was an increase in notifications of food poisoning from 4 to 10 cases, while scabies notifications rose from 28 to 55 cases.

Investigation of three outbreaks of food poisoning led to the discovery of a larger number of cases of either gastro-intestinal illness or the carrier state than the notifications would suggest, and in total there were 31 cases associated with these outbreaks, together with a further 10 cases occurring sporadically and unrelated to the outbreaks. The organisms discovered by laboratory investigation were:—

S. typhimurium	• •	 	 27 cases
S. enteriditis		 	 4 cases
S. panama		 	 3 cases
Cl. welchii		 	 3 cases
S. oranienburg	٠	 	 1 case
S. muenchen		 	 1 case
other Salmonella		 	 1 case
Staph. aureus		 	 1 case

Scabies has become an increasing problem over the past few years and of the 55 notified cases 26 were under 15 years of age, and 25 were between 15–45 years. It is usually a family infection, usually associated with overcrowded living conditions and inadequate facilities for bathing and the only hope of eradication is to improve these conditions and at the same time provide intensive treatment for each and every member of the family.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1969

	Number of Cases Notified								
		At Ages — Years							
Notifiable Disease	At all ages	Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards	
Scarlet Fever	18		7 4	11	_	_			
Whooping Cough Acute Poliomyelitis	0		4	4					
Magalag	99	6	43	46	4				
Diphtheria	l		 						
Dysentery	5		1	1	1	2			
Paratyphoid Fever	_	_	_	_				_	
Typhoid Fever			_						
Erysipelas	_		_			_		_	
Meningococcal Infection	—	_	_			_		_	
Food Poisoning	$\frac{}{10}$		-	2	3	4	1		
Ophthalmia Neonatorum	_		_	-	_	_			
Scabies	55	-	6	20	19	6	4		
Malaria	-		-	-	_				
Acute Encephalitis	_		_		_	_		_	
Infective Jaundice	9		1	<u> </u>	2	1	3	2	

Tuberculosis in Bournemouth

During the year 30 new cases of pulmonary tuberculosis and 2 cases of non-pulmonary tuberculosis were discovered and notified in the Borough, and in addition 27 persons diagnosed and notified elsewhere came to live in the Borough.

The accompanying table of new cases and deaths during the last twenty years shows quite clearly that while deaths from pulmonary tuberculosis have been reduced dramatically as a result of improved methods of treatment, new cases continue to occur following contact with chronic untreated or drug resistant cases, or by the reactivation of old healed disease. The older age groups, particularly males, give rise to most concern at the present time.

The general arrangement for the diagnosis, treatment and follow up of cases continued as before under the supervision of Dr. W. H. Tattersall, Senior Chest Physician, and one full-time Health Visitor was seconded to the Royal National Hospital for Clinic duties and the after care of patients.

Tuberculin testing by the Heaf method, followed by B.C.G. vaccination where necessary is offered to all school children at about the age of 11 years, and with the co-operation of the Chest Clinic all contacts of notified cases are followed up, whether family contacts or work contacts. The Housing Department gives priority in rehousing to applicants recommended by the Senior Chest Physician and the Medical Officer of Health as a source of infection to other members of their family by reason of unsatisfactory living conditions, and the Health Department also provides a limited amount of occupational therapy for house bound (usually elderly) patients.

The notifications of new cases and deaths from tuberculosis since 1948 are shown in the accompanying table:—

			New	cases Non-	'Dea	nths Non-
			Respiratory	Respiratory	Respiratory	Respiratory
1948			118	16	67	6
1949	• •	• •	109	18	54	8
	• •	• •	80	10		0
1950	0 0			11	46	1
1951		• •	127	13	37	<u> </u>
1952		• •	141	1 /	33	5
1953			98	17	20	2
1954		• •	136	16	28	
1955			117	9	12	2
1956			107	9	14	4
1957			114	11	10	4
1958			110	10	11	1
1959			81	4	7	3
1960			66	9	5	1
1961	• •	• •	37	5	6	1
1962	• •	• •	50	4	7	5
1963	• •	• •	37	10	5	ī
1964	• •	• •	40		12	2
			34	5 7	3	~
1965		• •			3	2
1966	• •		40	6 5	-	3
1967			38		5	1
1968	• •		36	6	3	2
1969	• •	• •	30	2	1	1

Both cases of non-pulmonary tuberculosis occurred in glands.

Particulars of new cases of Tuberculosis notified, and deaths from the disease of Bournemouth residents.

		New	Cases			Dea	aths		
	Respin	ratory	No Respir	n- ratory	Respii	Respiratory		Non- Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1 year 1-4 years 5-14 ,, 15-24 ,, 25-44 ,, 45-64 ,, 65-74 ,, 75 and upwards		1 1 4 3 3							
Totals	18	12	_	2	1		1	_	

At a later stage in the report, reference has been made to the prevention of tuberculosis under Section 28 of the National Health Service Act, and in addition 682 children attending the local education authority's schools were Heaf tested and 653 children received B.C.G. vaccination.

SECTION 172 OF THE PUBLIC HEALTH ACT, 1936

This section of the Act deals with the removal to hospital of infectious persons suffering from tuberculosis of the respiratory tract. No action was taken during the year.

Maternity and Child Health

At the end of 1969 there were 14 Infant Welfare Centres in the Borough, providing 23 sessions weekly. Attendances declined from 45,676 in 1968 to 43,980 in 1969, but more than half the attendances were in children under the age of one year. All clinics were supervised by a medical officer, one or two health visitors and a number of voluntary helpers.

In two medical practices where there were health visitor attachments, the practitioners conducted their own infant welfare sessions, involving 2,606 attendances.

Strouden Clinic closed 18th December 1969.

ATTENDANCES AT INFANT WELFARE CENTRES, 1969

Clinic	Infants under 1 year	Pre- school Children	Total	Sessional Average
Avebury Bear Cross Castle Lane East Howe (p.m.) East Howe (a.m.) East Way Iford Pelhams (a.m.) Pelhams (p.m.) Pokesdown (Wed a.m.) Pokesdown (Wed p.m.) Pokesdown (Fri p.m.) Stewart Road (a.m.) Stewart Road (p.m.) Strouden Tuckton West Cliff West Howe (a.m.) West Howe (p.m.) Winton (Mon. p.m.) Winton (Fri. a.m.) Winton (Fri. a.m.) Winton (Fri. p.m.)	1199 866 970 950 459 1151 855 880 1210 901 1034 1219 1064 1378 524 688 1464 490 954 1186 1216 727 1040	804 1226 1142 1284 781 1138 823 1162 1143 551 569 591 701 926 792 888 790 889 1544 1259 882 728 942	2003 2092 2112 2234 1240 2289 1678 2042 2353 1452 1603 1810 1765 2304 1316 1576 2254 1379 2498 2445 2098 1455 1982	39 42 41 43 24 46 33 39 56 27 38 36 35 44 26 32 46 28 47 50 40 30 40
	22425	21555	43980	38

Welfare Foods

The sale of welfare foods, which was transferred to local authorities from the Ministry of Food in 1954, has continued at all infant welfare centres. The demand for National Dried Milk declined considerably and it represents less than 5% of the sales in 1955. The reason is undoubtedly the preference most mothers show for the branded article, and although the cost may be a little more, a very wide selection now exists from which to choose.

	1963	1964	1965	1966	1967	1968	1969
National Dried Milk (tins)	11,475	9,865	10,476	10,165	8,589	3,178	2,214
	2,256	2,056	2,177	2,087	1,744	1,608	1,544
Vitamin A and D Tablets (packets) Orange Juice (bottles)			2,543 31,266				

Antenatal Clinics

The local authority does not now conduct any antenatal clinics, all antenatal supervision being in the hands of general practitioners, hospital maternity units and midwives.

BIRTHS OCCURRING IN BOURNEMOUTH, 1969

	19	63	19	64	19	65	19	66	19	67	19	68	19	69
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Domic- iliary Births	365	14	348	12.1	290	10.1	239	8.4	189	6.9	151	5.5	119	4.7
Institu- tional Births	2247	86	2523	87.9	2576	89.9	2605	91.6	2554	93·1	2586	94.5	2411	95.3
Totals	2612	100	2871	100	2866	100	2844	100	2743	100	2737	100	2530	100

During 1969 the following births were notified as occurring in the Borough:—

Domiciliary births Institutional births	119 (151) 2411 (2586)	Royal Victoria Hospital Aston Grays Maternity Home Firs Maternity Home Free Church Council Maternity Home	240	(1348) (302) (909)
		Waterinty Home	2411	(2586)

TOTAL 2530 (2737)

Figures in brackets indicate comparative numbers for 1968.

This total is therefore 207 less than in 1968. The institutional births decreased by 175 and the domiciliary births declined by 32 to what is the lowest number recorded in Bournemouth in recent years. The wide availability of maternity beds in the local hospitals and general practitioner maternity homes is largely responsible for this trend, but as in many cases the mothers are discharged soon after confinement, a period of domiciliary maternity nursing is necessary afterwards.

In addition, 18 Bournemouth patients were delivered in the Hospital Management Committee's maternity home at Barton-on-Sea, 110 at Poole General Hospital, and 13 at other hospitals.

Infectious Diseases associated with Childbirth

There was no case of ophthalmia neonatorum during the year.

Nurseries and Child Minders Regulation Act, 1948 as amended by the Health Services and Public Health Act, 1968

The expansion of the privately run day nursery and play-group movement continued into 1969, and at the end of the year 38 such premises were registered compared with 28 at the end of 1968. Between them they provided 602 places compared with 473 places a year earlier.

Whereas in earlier years private day nurseries were usually small groups of children looked after by a mother with one or two children of her own, many recent registrations have been for much larger numbers and of the thirteen premises registered in 1969 six were for 15 or more children each.

All private nurseries were run in either ordinary domestic premises or in public halls, and while it was comparatively easy to bring the accommodation to the physical standards required by the Regulations, the staffing position was far less satisfactory. There has been a tendency to think that because a woman has successfully reared one or two children of her own she is qualified and capable of looking after a large number of children, assisted by one or two friends. This is not necessarily so, and apart from exceptional cases all persons in charge of children, together with a proportion of their employed staff, should possess recognised qualifications indicating their competence and experience.

For the same reasons it has been found essential to apply a system of regular inspection to premises to ensure that all the conditions of registration are being observed.

Family Planning

The Family Planning Association held three clinic sessions per week at Gloucester Road Hospital and the local authority made a grant in respect of cases referred on medical grounds.

The pilot scheme introduced in 1966, whereby certain "problem family" mothers were offered free family planning advice by a lady doctor visiting patients in their own homes, with the approval of the family doctor, was continued during 1969. A number of the cases visited were already using some form of contraception but required further education in its use.

Patients recommended for I.U.D. or sterilisation were referred to the Royal Victoria Hospital.

Number of Patients visited during 1969	129
Number of visits made	180
Number of patients recommended for I.U.D	32
Number of patients recommended for sterilisation	
Number of patients recommended for oral contraception	26
Number of patients recommended for other forms of	
contraception	6

Mother and Baby Homes

Financial grants were continued by the local authority to the two mother and baby homes maintained by voluntary organisations within the Borough. Three local girls were admitted to the Free Church Council Home at 11 St. Alban's Avenue compared with two in 1968. Two local girls were admitted to St. Thomas' Lodge, one as a maternity case the other as a shelter case.

The Free Church Council Home ceased to function on 20th July 1969.

In addition, two Bournemouth girls were provided with accommodation outside the Borough at the expense of the local authority compared with seven in 1968, and although the illegitimacy rate in the Borough is regrettably high, only 2.5 per cent of such expectant mothers appealed to the local authority for financial help during 1969.

Day Nursery

The Corporation Day Nursery which transferred from 10 Wellington Road to 79 Lansdowne Road on 29th October 1969 had an average daily attendance of 33 compared with 31 in 1968, and although cases of minor infectious disease occurred from time to time there was no serious illness.

Throughout the year admissions were limited to "priority" cases which, broadly speaking, meant children supported by only one parent, but in exceptional cases might include a child admitted for other medico-social reasons. Instead of the former classification into babies, tweenies and toddlers sections, family grouping was introduced and this has been very successful.

All children in the Nursery received medical and dental supervision, together with immunisations where required.

An Enquiry into Congenital Abnormalities

For some years the Ministry of Health has asked local authorities to enumerate and codify all congenital abnormalities occurring in newborn babies, and during 1969 there were 42 cases so recorded. These ranged from minor abnormalities of the hands and feet to serious defects such as heart disease, but at this early stage it is impossible to say with any certainty whether a child is of normal intelligence.

Dental Services for Mothers and Pre-School Children, 1969

Report by Mrs. M. B. Redfern, L.D.S., Principal Dental Officer

The number of pre-school children attending for treatment has remained substantially the same, but regrettably there was a 50% drop in those recalled for additional inspection and treatment. This follows the pattern in the School Dental Service where the recall system has had to be considerably modified due to pressure of work. There was a drop in the number of fillings done but the numbers of other forms of treatment varied little.

There is still a regrettable number of very young children presenting with early caries due to incorrect feeding methods, despite continuous dental health propaganda by public health staff. It is hoped that the restriction of sale of vitamin syrups in the Welfare Clinics will reduce some of this early caries, but the chief cause remains the bottle of sweetened milk left with baby in the cot at night and in the pram during the day.

Consideration is being given to introducing a Third Birthday Dental Inspection, but with the present staff ratio it will not be possible to offer treatment to more than a very small number of the children who would be inspected. However, it is important that they should have a Dental Inspection around the age of three so that the habit of regular inspection and treatment can be started well before the child goes to school.

The Day Nursery and Residential Nursery were visited twice during the year. At the Day Nursery a total of 69 children were inspected and 17 referred for treatment. At the Residential Nursery a total of 30 children were inspected and 2 referred for treatment. At the Day Nursery the children are given only raw fruit or crisps during their mid-morning break and the high standard of oral hygiene is very gratifying. Similarly at the Residential Nursery the standard of oral hygiene is very high and the very low caries rate there clearly demonstrates how dental caries is virtually eliminated when diet is carefully controlled and the teeth are brushed regularly.

Expectant and Nursing Mothers

The number of expectant and nursing mothers presenting for treatment has declined following the national trend, since they are eligible for free treatment in the General Dental Service. However, unmarried mothers in residence at St. Thomas' Lodge attend 'Avebury' for inspection and treatment and special arrangements are made so that treatment is available at short notice for them.

Dental Health

Dental Officers visited all the Infant Welfare Clinics during the year and inspected all the babies and toddlers present, at the same time advising mothers on correct diet, teething difficulties and other problems.

Talks, accompanied by films, were given at Relaxation and Mothercraft classes at Avebury and East Way Clinics but it has not been possible to extend this service to the other clinics, although I feel that this is one of the most important aspects of our work in preventive dentistry.

Finally, I am grateful to all members of the medical and dental staff, the Health Education Officer and the Health Visitors for their unfailing help and co-operation during the year.

Dental Services for Expectant and Nursing Mothers and Children under 5 years

		Expectant
	Children	and
	0-4	Nursing
Attendances and Treatment	(incl.)	Mothers
First visits	177	23
Subsequent visits	328	21
Total visits	505	44
Number of additional courses of treatment other		
than the first course commenced during year	40	4
Number of fillings	385	31
Teeth filled	368	31
Teeth extracted	62	4
General anaesthetics given	32	
Emergency visits by patients	20	4
Patients X-rayed	2	3
Patients treated by scaling and/or removal of		4.0
stains from the teeth (prophylaxis)		12
Teeth otherwise conserved		
Number of courses of treatment completed during	100	1.0
the year		18
Patients supplied with full upper or full lower dentures (first time)		
Patients supplied with other dentures		1
Number of dentures supplied		1
General anaesthetics administered by Dental Officers		1
Imamaatiana		
Inspections		
Number of patients given first inspections during the year	1005	18
Number of patients who required treatment		18
Number of patients who required treatment		18
	420	10
Sessions		
Number of Dental Officer sessions devoted to Maternity and Child Welfare patients	1.2	1

The Domiciliary Services provided by the Corporation

Domiciliary Midwifery Service

Six full-time midwives were directly employed by the Council and attended 119 home confinements, in addition to nursing 609 "early discharges", patients who had been confined in hospital but discharged before the normal time.

The numbers of home confinements have gradually declined during the last ten years and while a certain number of women will always refuse to have their babies in hospital for a variety of reasons, the consensus of medical opinion suggests that hospital confinement is much safer, even though the mother is discharged home within a few hours of delivery. These short-stay General Practitioner maternity units, closely associated with the maternity unit of a hospital will undoubtedly prove the pattern for the future.

Home confinements during the last ten years were as follows:—

1960	• •		 609
1961			 595
1962			 498
1963	• •		 357
1964			 347
1965		• •	 281
1966			 236
1967			 189
1968			 151
1969			 119

Details of domiciliary confinements attended were :-

Total No. of confine-	Primi- para	Multi- para	No. of Previous Pregnancies											
ments			1	2	3	4	5	6	7	8	9	10	11	
119	7	112	47	40	15	7	2	1	-	-	-	_	_	
							<u> </u>	<u>!</u>		<u> </u>			!	

Age Groups							
15–20	20–25	25–30	30–35	35–40	40-45		
9	33	42	32	2	1		

Gas and oxygen analgesia was given in 112 cases and pethidine in 95 cases.

MATERNITY CASES ATTENDED

	Number of Deliveries attended by Midwives in the area during 1969					
	Dor	Cases in				
	Dr. not Booked	Dr. Booked	Totals	Institu- tions		
(i) Midwives employed by the Authority		119	119	_		
tary Organisations:— (a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service Act (b) Otherwise (including Hospitals not transferred to the Minister under						
the National Health Service Act) (iii) Midwives employed by Hospital Management Com-				9		
mittees or Boards of Gover- nors under the National Health Service Act (iv) Midwives in Private Practice (including Midwives employed in Nursing Homes)				2385		
TOTALS	-	119	119	2394		

MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES ACT, 1951

Number of cases in which medical aid was summoned during the year under section 14 (1) of the Midwives Act, 1951, by a Midwife:—

under section 14 (1) of the Midwives Act, 1951, by a Midwife:—											
(a)	For	Domicili	ary cas	ses :—	ŕ						
	(i)	Where t	he Me	dical	Practitic	ner ha	ad arr	anged	to pro	vide	
		the pati	ent w	ith m	aternity	medi	cal se	rvices	under	the	
		National	Healt	h Servi	ce						47
	(ii)	Others				• •					_
Total											47
	_		_ ^							-	
(b)	For	cases in	Institut	ions							2

Health Visiting

At the end of 1969 the health visiting establishment consisted of a Deputy Chief Nursing Officer and 30 health visitors, under the overall control of the Chief Nursing Officer. The number in post was substantially below establishment and at the present time, with all the uncertainties regarding the future of the local authority's health services, it seems quite impossible to more than maintain the status quo, in spite of all our efforts. The Government should realise, if it does not do so already, that its preoccupation with the curative services is doing irreparable damage to the preventive services on whose continuance so much depends.

Liaison Arrangements

(a) with General Practitioners

During the year the number of general practitioner attachments continued at four, and even this level was only maintained with difficulty, as replacements had to be found to cover resignations. Quite apart from the fact that the total number of health visitors did not allow of any further attachments, the essence of the scheme is that both parties should work together in perfect harmony and this calls for not a little skill in psychological matching.

The four attachments were in :-

(1)	Moordown/Castle	Lane	 	(3 doctors)
(2)	Charminster		 	(4 doctors)
(3)	Southbourne .		 	(5 doctors)
(4)	Westbourne		 	(5 doctors)

(b) with the Hospital Service

Liaison arrangements continued with hospitals of the Bournemouth and East Dorset Hospital Management Committee. One Health Visitor was permanently attached to the Chest Clinic, and there was close liaison by the two geriatric health visitors with Christchurch Hospital, and by a special health visitor with the Paediatric Unit at Poole General Hospital.

An arrangement whereby a health visitor helps with contact tracing and defaulters from the V.D. Clinic at the Royal Victoria Hospital will soon end when the V.D. Services are centralised at Gloucester Road Hospital and a Social Worker is appointed for the purpose.

Infant Welfare Clinics

Two health visitors attended the majority of the 23 Infant Welfare Centre sessions held each week, discussing problems with the mothers, weighing babies where necessary and referring matters requiring further advice to the clinic doctor. The majority of clinics were attended by one of the full-time Assistant Medical Officers of Health employed by the local authority, but a number of part-time medical officers, often retired from the public health service, are called upon in emergency.

Total attendances were 43,980 in 1969 compared with 45,676 the previous year.

The help of the ladies giving voluntary service at the Clinics has been greatly appreciated, as they have carried out a wide variety of tasks, often under very trying conditions.

Parentcraft Classes

In the early part of the year a series of three mothercraft classes were held at Avebury and were attended by 41 mothers. Four meetings for husbands, also held at Avebury, were attended by 20 fathers. This type of instruction ceased part way through the year and instead parentcraft classes at which both the husbands and wives attended were substituted. Seven series of such classes were held at Avebury and Winton Clinics attended by 136 parents. In addition, the film "To Janet A Son" was shown at Winton and Pokesdown Clinics at which 329 parents attended.

Child care courses continued in the schools during the year.

Relaxation Classes

Classes for expectant mothers were held at Avebury, Pelhams, East Howe, Winton, Pokesdown and East Way. There were in all, 51 courses of 10 lecture/demonstrations each, attended by 468 expectant mothers.

Visits to the Elderly and Aged

During 1969 a total of 2,795 elderly and aged persons received 6,044 visits, and 520 of these were seen at the request of the Hospital Management Committee regarding their application to be admitted to a chronic sick bed in hospital. Admissions to geriatric units have continued to be extremely difficult, and despite all efforts by the Consultant Geriatric Physicians to establish a priority waiting list based on both medical and social needs, delays in admission have been frequent.

The two specialist geriatric health visitors concentrated their attention on the most vulnerable groups, those living alone and those awaiting admission to hospital, and these visits were frequently laborious and time consuming. Access to the old person was often difficult, particularly in those cases where mental problems were added to those of senility and frequently a decision had to be made whether in the best interests not only of the old person, but also of their neighbours compulsory removal to a hospital or an old persons' home should be considered.

In all appropriate cases additional help was provided where possible; home nursing, home help, meals on wheels, chiropody, sheet service, or the public health inspector's advice sought on sanitary problems.

Close co-operation has been maintained with the Welfare Services Department and the many statutory and voluntary organisations working among the elderly and the aged.

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. 3	. ,

									33										
	Visite made	by H.Vs.	1	,	I	3,986	4,532	4,488	4,106	3,590	4,701	4,701	6,072	5,981	5,874	6,827	6,524	6,878	6,503
Visits by	tuber-	visitors	1,401	1,607	1,525	1,297	1,562	1,532	1,791	1,877	1,953	2,026	1,712	1,361	1,758	1,545	914	1,168	1,097
Visits to TB house-	nolds inc.	Cases"	223	190	207	279	230	221	184	124	119	179	84	40	20	17	29	14	ς.
	Other Cases	Total Visits	1,657	1,869	1,881	2,705	4,362	4,494	4,384	5,635	6,221	6,081	7,062	6,312	5,424	7,203	7,016	8,024	7,054
	ages of 1 & 5	Total Visits	11,830	11,460	11,712	12,136	11,920	11,349	10,354	8,307	12,870	11,242	12,139	10,150	9,314	10,568	10,250	10,173	9,671
Children under 1 year of age	Visits	Total	8,904	080'6	9,001	8,615	8,247	8,007	7,653	6,823	8,788	8,674	9,631	8,428	7,688	8,375	7,408	7,222	6,887
Childre 1 year	V	First	1,642	1,592	1,496	1,483	1,513	1,645	1,609	1,609	1,688	1,861	1,849	1,934	2,014	1,910	1,853	1,799	1,710
Expectant Mothers	Visite	Total	1,741	1,991	1,972	2,166	2,122	1,963	2,076	2,070	2,450	2,136	1,956	1,840	1,350	1,296	1,191	1,103	1,071
Exp	V	First	806	1,100	1,047	1,117	1,162	1,156	1,130	1,114	1,260	1,132	1,131	1,156	936	888	853	765	708
		Year	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969

Special Services for Elderly and Handicapped Persons

(a) Laundry Service

The laundry service provided drawsheets, mackintosh sheets, air rings and covers to 299 cases compared with 298 cases in 1968 and 253 cases in 1967, mainly persons suffering from double incontinence and on the waiting list for Christchurch Hospital. These articles were delivered to the homes of the patients three times per week, and the dirty linen collected and laundered at Christchurch Hospital.

(b) Chiropody Service

The chiropody service is available to old people, disabled persons and expectant mothers who are unable to make private arrangements.

A charge of 2s. 6d. per attendance at the chiropody clinic is made to all patients except those in receipt of supplementary benefit from the Ministry of Social Security, who continued to receive free treatment.

The establishment is for 2 Chiropodists, and during the year this was made up of both full-time and sessional appointments.

CHIROPODY CLINIC, 1969

Number of persons treated	 	 	1,383
Number of treatments given	 	 	7,193

(c) Problem Families

The arrangements for helping problem families continued as before, and regular monthly meetings of the Family Case Committee allowed full discussion of current problems and the diversion of assistance and enquiry into the most appropriate channels.

The results of work with problem families are almost invariably disappointing to those who expect substantial improvements. Success is more often measured by the maintenance of the status quo.

HEALTH EDUCATION SERVICE

Report by C. N. Gumbley, S.R.N., R.M.N., R.N.T., B.T.A., M.I.H.E. Health Education Officer

During 1969, 1,154 health education talks, demonstrations and film shows were arranged and/or presented by members of the Health Department. This figure, an increase on the total number

presented in previous years, reflects the enthusiastic support given to health education by all sections of the department. Increased co-operation with other local organisations, both lay and professional groups, made possible the introduction of a number of new health education projects and also aided the general expansion in the work of the Health Education Service.

Interest in school health education was maintained and 48% of the health education recorded in 1969 was in schools. Health education in clinics increased, as did the number of talks and film shows to local groups.

Clinics

- (a) Health Visitors continued to perform invaluable health education in their personal contacts and group discussions with mothers.
- (b) Poster Displays were staged on home safety, infant welfare, cervical cytology, foot health, beach and water safety, fire and firework safety, and Christmas safety.
- (c) Relaxation Classes continued throughout the year in six clinics, but Mothercraft Classes were discontinued during June and replaced by Parentcraft Classes, open to expectant mothers and fathers. Two evening courses in parentcraft are now established in the Borough at Winton and Avebury clinics and although attendances vary, the interest and enthusiasm shown by those who do attend warrants the continuance of these courses.
- (d) Parents' Evenings (10 were held at Winton and Pokesdown clinics when the film "To Janet A Son?" was screened to 'full houses'.

Schools

A number of special campaigns were conducted in schools during the year and existing health education programmes were continued, yet there was a slight decrease in the total number of talks, demonstrations and film shows presented, from 575 in 1968 to 557 in 1969.

Special campaigns were on emergency resuscitation (January and February), dental health (March and November), water safety (July), fire safety and the prevention of firework accidents (October), and road safety (December).

The fire safety and prevention of firework accidents campaign was a new health education programme introduced into Junior schools with the co-operation of Fire Prevention Officers of Bournemouth Fire Service. This programme had the support of teachers and was well received by children, Poster displays were staged and 87 talks and film shows presented prior to Guy Fawkes' Night.

Courses and individual talks and film shows were also presented during the year on smoking and health, sex education, child care, first aid, accident prevention, food hygiene, nutrition and mental health.

Miscellaneous Groups

During 1969, circulars were again sent to more than 500 local groups and organisations (Church groups, P.T.A's, and professional societies) offering speakers and illustrated talks (25) on a wide range of health education topics. The response was very good — many groups visited during 1968 being revisited during 1969 — and the number of talks, demonstrations and film shows presented to these groups increased from 240 in 1968 to 339 in 1969.

Speakers were requested on almost all the subjects offered — the more popular being emergency resuscitation (49), food hygiene (46), first aid, home safety and accident prevention (44), mental health and stress disorders (24), road safety (24), and nutrition and weight (16). Interest was also shown in the work of a health visitor (18), the work of a public health inspector (11) and the local ambulance service (12).

As in previous years, health education was undertaken with the Women's Royal Voluntary Service, the British Red Cross Society, the St. John Ambulance, Police, and School Meals Service. During 1969, new training schemes were introduced for pre-school playgroup organisers and children (road safety, dental health, child development), industrial training boards (food hygiene, first aid, nutrition), school teachers and student teachers (first aid, social services), and the Borough Engineer's Department staff (emergency resuscitation).

Also in 1969, public health inspectors, in collaboration with the inspectors in Poole, introduced training courses in Food Hygiene for food operatives engaged in the local Food and Catering industries.

Dental Health Education

There was a slight increase in the number of dental health talks and film shows presented, from 157 in 1968 to 169 in 1969.

Schools were again the main focus of attention and efforts were continued to ensure that dental films are presented to all primary school children during their years in both the First (Infants') and Junior Schools. Occasional talks and film shows were also presented in senior and independent schools.

Fifty-two talks and film shows were presented at relaxation and parenteraft classes and ten to pre-school playgroup audiences.

In-Service Training

In addition to the regular monthly staff meetings at East Way Clinic, special meetings or training sessions were also held for ambulance personnel, day nursery staff, chiropody staff, health visitors, home nurses and public health inspectors.

Lectures, demonstrations, films and discussions were presented at these meetings on child care and development, sex education, cervical cytology, food poisoning, suicide, drug dependence, coronary thrombosis, mental illness, noise hazards, and scabies.

Miscellaneous

- (a) Two exhibitions were staged in June on "Emergency Resuscitation" at the British Dental Association's Annual Conference in Bournemouth, and on "The Public Health Services" at a floral festival at St. Luke's Church, Bournemouth.
- (b) In July, a 'Home and Water Safety' poster exhibition was staged in the Lower Gardens, Bournemouth, in conjunction with the annual exhibition of road safety posters.
- (c) In October, to coincide with the Fire Safety and Firework Safety Campaign in schools, poster displays on these themes were staged in public buildings, and 5,000 bookmarks bearing fire safety slogans were distributed through local public libraries.
- (d) Six thousand Christmas serviettes carrying home safety slogans were distributed for use at clinic and school parties during December.

(e) During 1969, the Health Education Officer visited Portsmouth (for discussions on "Health Education and Venereal Diseases"), Dorchester (for a psychiatric meeting at Herrison Hospital), London (for a tutors' refresher course and the 'Navex' exhibition) and Folkestone (for the National Home Safety Conference).

Summary

	1969	1968	1967	1966
Lectures, demonstrations, talks given	449	418	207	88
Films shown	705	709	595	417
	1154	1127	802	505

Appreciation is expressed to the medical, dental, nursing, administrative and clerical staff of the Department who gave their invaluable support to the work and development of the Health Education Service during 1969.

ACCIDENT PREVENTION — 1969

413 talks, demonstrations and filmshows on various aspects of accident prevention were arranged and/or presented by members of the Health Department during 1969. Much of this work was undertaken in schools (68%), some with local professional and lay groups (29%) and the remainder in clinics (3%).

Poisoning Accidents — Children under Five Years

Thirty-seven (37) children under the age of five years were were admitted to hospital in Bournemouth during 1969 as the result of poisoning accidents — the same number as was admitted during 1968.

All such cases are followed up by Health Visitors who advise on safety measures and prevention of such accidents.

Poisons involved in each case were :-

Aspirin (10)	Paraffin (3)
Kwells	Turpentine (4)
Librium	Lindex insecticide
Lasix	Cologne
Tryptophan	Paint
Valium (2)	Trichlorethylene
Amphetamine	Chlorobenzone
Sal Volatile	Parazone
Antihistamine (Banisyt)	Cleanopine
Berries (4) (Cotoneaster 2,	Deadly Nightshade 1, Unknown 1).

Home Accidents

Cases Treated at the Royal Victoria Hospital:—

	JanMarch	April-May	July-Sept.	OctDec.
1966	—	183(8)	99(3)	110(12)
1967	266(18)	240(14)	180(15)	233(15)
1968	254(22)	327(22)	320(25)	284(22)
1969	351(24)	231(21)	200(16)	284(25)

(Figures in brackets indicate patients admitted to hospital).

The number of home accident cases treated at the Royal Victoria Hospital has shown a steady decrease over the year.

Summary

						Talks	Films shown	Total
Emergency Re	suscita	ation				25	68	93
First Aid/Hom	ne Safe	ety/Acc	cident I	Prevent	ion	62	26	88
Fire Safety/Pre						29	58	87
Water Safety						33	40	73
Road Safety				• •	• •	2	70	72
			•			151	262	413

THE HOME NURSING SERVICE

On November 8th Miss Freda Grindrod, who had been Superintendent Home Nurse since 1952, commenced her well earned retirement, leaving behind her an enviable reputation of selfless devotion to duty and a service which had met every increasing demand on it with unflustered efficiency.

Following Miss Grindrod's retirement, the administration of the nursing services was reorganised and Mrs. M. T. Wright was appointed early in 1970 as Deputy Chief Nursing Officer in charge of Home Nursing and domiciliary midwives, with a staff of 25 full-time and 3 half-time home nurses and 6 domiciliary midwives.

During the year under review the demands on the home nursing service were even greater than in 1968, 87,099 visits compared to 84,783, though there was little change in the pattern of demand. Over 70% of the cases visited were over 65 years of age, and apart from services in connection with admission to hospital, a high proportion of the cases were of chronic ill-health often involving a multiplicity of treatments. There were also many cases of early discharge from acute medical and surgical wards in the hospitals which required frequent visits, as some patients were discharged home within a few days of operation.

New Patients attended during 1969

In all, 3,757 patients were served during the year, of whom 2,797 were new cases, made up as follows:—

Complaint				No. of Cases
Tuberculosis				14
Respiratory system (other than T.B.))			144
Heart and Circulatory system				563
Digestive system				369
Reproductive system				57
Nervous system				130
Urinary system				67
Cancer				271
Diabetes				86
Injuries, burns, etc			• •	77
Senility				183
Rheumatism			0 0	204
Leg Ulcers and Skin conditions		• •		202
Ear, Nose and Throat conditions				25
Preparation for hospital treatment				322
Miscellaneous conditions			• •	83
				2,797

For some years a routine urine test has been carried out where possible by the home nurses and six cases of previously unrecognised glycosuria were discovered among 1,247 cases tested. These patients were referred to their own doctors for further investigation.

The age distribution of all patients treated in 1969 was :—

	Male	Female	Total	Percentage
0- 4 years 5-14 years 15-24 years 25-44 years 45-64 years 65-74 years 75- years	6 14 25 58 263 367 439	4 7 45 117 530 669 1213	10 21 70 175 793 1036 1652	0·26 0·56 1·86 4·66 21·11 27·58 43·97

Sources of referral of new cases in 1969 were :-

General Practitioners						1,783
Hospitals						795
Personal application		• •				152
Voluntary agencies	.i. Cl	oost Clie		• •		(0)
Health Department ar	ia Ci	iest Cili	iiic	• •	• •	- 60
						2,797

During the year, 2,756 cases were removed from the register owing to:—

Admission to hospital	 	 	576
Died	 	 	282
Satisfactory outcome of case	 	 	1,898
			2,756

The Nursing of Sick Children

Just under one per cent. of patients nursed during 1969 were below the age of 14 years, chiefly for complications of infectious disease and minor medical and surgical conditions. Home nurses attended child patients on their own districts and no special arrangements were necessary.

The Treatment of Visitors

Requests for the continuation of special treatments were received on 192 occasions, and 1,567 visits were made to visitors in hotels, boarding houses and private holiday accommodation.

Injection Therapy

During the year, 29,946 injections were given to 1,276 patients, of which 8,232 were insulin injections.

Daily injections were necessary for 186 patients, 65 patients received injections twice a day, and three patients three times a day.

Late Visits

The number of visits made between 8.0 p.m. and 8.0 a.m. decreased from 219 in 1968 to 130 in 1969 and were carried out by the home nurse on whose district the request arose.

At the end of the year 1,001 cases remained under treatment, receiving visits as follows:—

Twice Daily	Daily	Alternate days	Twice Weekly	Thrice Weekly	Weekly	Fort- nightly	Monthly
13	127	34	111	29	431	120	136

A summary of the year's work and a comparison with previous years, was as follows:—

	1962	1963	1964	1965	1966	1967	1968	1969
Number of patients on the Register, 1st Jan.	766	789	844	833	893	863	933	960
Number of new patients attended	2547	2655	2634	2558	2646	2679	2879	2797
Total number of patients attended Number remaining on the Register on 31st	3313	3444	3478	3391	3539	3542	3812	3757
December	789	844	833	893	863	933	960	1001
Number of Patients taken off the Register	2524	2600	2645	2498	2676	2609	2852	2756
Total number of nursing visits	75,541	75,730	78,386	76,399	78,138	79,840	84,783	87,099

The illnesses of patients were classified as follows:—

	1962	1963	1964	1965	1966	1967	1968	1969
Tuberculosis	 62	61	42	30	26	18	23	17
Pneumonia	 43	58	42	34	29	41	37	35
Miscarriages, etc.	 36	39	41	19	30	19	27	18
Surgical	 429	395	452	370	542	507	711	592
Medical	2705	2855	2847	2889	2857	2913	2969	3026
Infectious diseases	 38	36	54	49	55	44	45	69
	3313	3444	3478	3391	3539	3542	3812	3757

DOMESTIC HELP SERVICE

At the end of the year the Domsetic Help Service consisted of an Organiser, two Assistant Organisers and 92 part-time domestic helps serving 1,219 cases and working nearly 90,000 hours.

For many years now the domestic help service has been not only completely inadequate for the demands made on it. but all attempts to increase its size have been fruitless. Finance is available, an increased establishment is available, but the competition for female labour in this area is so intense that no permanent solution of this problem has been found. Of necessity the number of cases served has had to be pegged or even reduced according to the numbers of helps available, and all new cases accepted have had to be rigorously assessed on the basis of need.

The community owes a great debt of gratitude to these women who have worked so hard under what are often most unpleasant and unrewarding conditions and to their hard working organiser, Mrs. Watts.

SUMMARY OF CASES HELPED

Type of Case	Number	Hours spent	Percentage of Total Hours	Average hours per case
Old age Illness	1,010 171	73,613 13,973	81·9 15·6	72·9 81·7
Tuberculosis Confinements Mental Deficiency	20 9	393 447 592	0·4 0·5 0·7	49·1 22·3 65·8
Maternity and Child Welfare	<u> </u>	818	0.9	818.0
TCTALS	1,219	89,836	100.0	73.7

Classification of cases served (by ages).

Under 15 years 15-64 years 65 years and over	• •	• •	• •	1 198 1,020	0·1% 16·2% 83·7%
				1,219	100.0%

Ambulance Service

During 1969 there was a small decline in the number of patients carried although the mileage increased, largely the effect of hospital changes involving the centralisation of services.

Establishment changes were minimal, adding one Driver/ Attendant and one Vehicle Maintenance Assistant to the staff, which now stands as follows:—

Ambulance Officer

- 4 Control Officers
- 35 Driver Attendants
 - 2 Vehicle Maintenance Assistants
 - 1 Clerk
 - 2 part-time Telephonists
 - 1 Cleaner

The local authority fleet consisted of 15 stretcher carrying ambulances, one of which was used primarily as a fast emergency vehicle for long road journeys while 3 of the vehicles were used mainly for sitting patients including the transport of trainees to the Turner Training Centre. The Hospital Car Service, now administered by the local authority, regularly used about 14 cars and drivers.

The maximum advantage has been taken of the courses at the Ambulance Training School at Bishop's Waltham and during the year nine drivers attended and in addition one Control Officer attended an Officer Training Course. All staff attending these courses were successful. In addition a crew again entered the National Ambulance Competition.

Intensive in-service training of all staff under the direction of the Ambulance Officer and the Training Officer has resulted in a high standard of efficiency being maintained.

TABLE SHOWING PATIENTS CARRIED AND MILEAGES COVERED BY AMBULANCE SERVICE SINCE 1950

Year		Local Authority		ohn iation	Hos _j Car S		То	otal
- Car	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage
1950	11,937	100,634	2,545	31,325	7,438	82,431	21,920	214,390
1951	12,335	103,192	2,973	25,401	13,132	82,467	28,440	211,060
1952	15,340	110,424		21,391	15,639	71,425		203,240
1953	18,782	127,334	2,159	13,619	17,446	73,258		214,211
1954	20,683	127,975		1,228	17,353	71,456		200,659
1955	23,104	142,991	163	1,131	18,241	69,740		213,862
1956	27,409	148,584	271	1,430	18,006	72,625		222,639
1957	30,736	159,511	427	1,487	17,257	70,866		231,864
1958	31,037	157,235	557	1,264	18,441	82,911	50,035	241,410
1959	35,030	170,938	572	1,777	19,494	89,526	55,096	262,241
1960	35,275	171,315	3,808	13,295	20,385	96,220	59,468	280,830
1961	36,196	173,192	4,639	15,856	21,686	109,518	62,521	298,566
1962	35,912	176,452	4,792	15,798	20,589	112,442	61,293	304,692
1963	36,266	169,053	3,484	9,917	18,902	102,075	58,652	281,045
1964	42,750	183,068			22,077	120,188	64,827	303,256
1965	43,765	183,547			17,317	95,218	61,082	278,765
1966	42,224	189,793		_	19,904	98,467		288,260
1967	40,172	226,266			25,316	111,884	65,488	338,150
1968	40,158	226,033			32,360	137,688	,	363,721
1969	39,406	226,260			31,404	145,990	70,810	372,250

	Ave	rage miles cover	ed per patient car	rried
Year	Local Authority	St. John Association	Hospital Car Service	Total all Services
1950	8.43	12.31	11.08	9.77
1951	8.36	8.53	6.27	7.42
1952	7.19	6.76	4.56	5.95
1953	6.78	6.30	4.19	5.58
1954	6.18	4.58	4.11	5.23
1955	6.18	6.94	3.82	5.15
1956	5.42	5.28	4.03	4.87
1957	5.19	3.48	4.11	4.79
1958	5.07	2.27	4.50	4.82
1959	4.88	3.11	4.59	4.76
1960	4.85	3.49	4.72	4.72
1961	4.78	3.42	5.05	4.78
1962	4.91	3.30	5.46	4.97
1963	4.66	2.85	5.40	4.79
1964	4.28		5.44	4.68
1965	4.19		5.50	4.56
1966	4.49	-	4.95	4.64
1967	5.63		4.42	5.16
1968	5.63		4.25	5.02
1969	5.74	_	4.65	5.26

THE WORK DONE BY THE SERVICE DURING 1969 IS SHOWN IN THE FOLLOWING TABLE

	Vehicles	Patient	Patients Carried	Carried	Abortive	Total	Tran	Transport
Service	(Number at	Tourneys	Accident		Service	IVIII CABCS	03	Nall
	31.12.69)		or Emergency	Other	Journeys		No.	Rail Miles
Directly provided	Ambulances (11)	10,339	3,361	25,344	1,595	175,414	41	4,691
	Dual purpose (4)	1,921	37	10,664	622	50,846	139	16,449
Hospital Car Service		8,121		31,404	1,318	145,990		ĺ
		20,381	3,398	67,412	3,535	372,250	180	21,140

Vaccination and Immunisation

Protection against smallpox, diphtheria, whooping cough, tetanus, poliomyelitis, measles and tuberculosis continued throughout the year under schemes approved by the Department of Health and Social Security and the Department of Education and Science. Every effort was made not only to achieve a high rate of protection against disease in infancy, but to maintain this protection through school life and beyond by means of "booster" doses, and the computer programming of individual schedules and automatic recall of children for "booster" doses has gone some way towards achieving these ends. Regrettably, those diseases which have been controlled in this country as a result of vaccination, such as small-pox and poliomyelitis, are now omitted by many parents from their children's schedules and if this trend continues the result can only be a relatively unprotected population should either of these diseases strike again.

The following table from the Department of Health and Social Security shows the percentages, vaccinated in Bournemouth compared with the equivalent national figures:—

	Chi	ildren born in 1	967	
	Whooping Cough	Diphtheria	Polio- myelitis	
England and Wales	81%	83%	80%	
Bournemouth	95%	95%	81%	
	Chi	Constlant		
	Whooping Cough	Diphtheria	Polio- myelitis	Smallpox (children under 2)*
England and Wales	66%	67%	65%	31%
Bournemouth	75%	75%	76%	38%

^{*} Includes only children who were vaccinated during 1969 and were under 2 years old at the time, and is calculated as a percentage of children born during 1968. This is considered to give a reasonable estimate of the proportion of young children being vaccinated against smallpox. Figures in respect of children born in 1968 are low due to the revised schedule of immunisation under which many children had not completed their immunisation by 31st December, 1969.

Vaccination against Smallpox

1,299 children under the age of 16 years received protection against smallpox, 779 by general practitioners and 520 by the local authority. The total includes 651 infants under the age of 2 years.

Vaccination against Measles

The local authority has also carried out measles vaccination since June 1968 but due to problems arising in the manufacture of the vaccine, the programme was considerably curtailed from July 1969 to the end of the year and the only groups to receive vaccination against measles during that period were children aged between 4 and 7 years and children between 1 and seven years residing in residential and day nurseries. 1,111 were given measles vaccination, 604 by general practitioners and 507 at the local authority clinics.

Immunisation against Diphtheria

A total of 3,527 children received protection against diphtheria either as a single antigen or combined with other antigens. 1,694 were protected by general practitioners and 1,833 at local authority centres.

Details follow:-

		Chil	dren boi	rn in yee	ars		
	1969	1968	1967	1966	1962/ 65	others under age 16	Total
A. No. of Children who completed a full course of Primary Immunisation in the Authority's Area (incl. temporary residents) during the 12 months ended 31st December, 1969	6	1137	31	20	10	3	1207
B. Number of children who received a secondary (reinforcing) injection (i.e. subsequently to primary immunisation at an earlier age), during the 12 months ended 31st December, 1969		6	893	82	1270	69	2320

Vaccination against Poliomyelitis

During 1969, 1,220 persons completed a course of vaccination and 2,104 persons received booster doses. Of these, 1,645 were protected by general practitioners and 1,679 at local authority centres.

Details follow:

		C	hildren l	born in	years		-
	1969	1968	1967	1966	1962/ 65	others under age 16	
Primary Vaccination	 7	1145	44	8	12	4	1220
Booster Doses	 		44	10	1268	782	2104

Vaccination against Yellow Fever

The authority continued as an approved centre for vaccination against Yellow Fever and 754 persons were vaccinated during the year.

Prevention of Illness—Care and After Care

Arrangements in force during the year included

(1) Tuberculosis

- (a) The seconding of a health visitor for full-time duty at the Chest Clinic and in domiciliary visiting of tuberculous patients.
 - (b) Boarding out of child contacts.
- (c) Assistance in rehousing tuberculous patients by recommendation to the Housing Committee. During the year 1 case was rehoused.
 - (d) Provision of nursing requisites.
- (e) Provision of domestic help, 8 patients receiving 393 hours service.
- (f) A grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect of their work in providing cash payments, extra nourishment, bedding, coal and other items for tuberculous patients and their families.
- (g) Occupational therapy for domiciliary patients, 33 cases receiving 341 visits during the year.

(2) Venereal Diseases

A health visitor assists at the special clinic at the Royal Victoria Hospital.

(3) Illness generally

Provision was made at rest homes for the convalescence of patients recommended by general practitioners or hospital consultants. During the year 11 persons received recuperative holidays compared with 21 in 1968. The cost to the patient was based on income, but the majority of beneficiaries under the scheme paid little if anything. All patients who had been away in rest homes were visited on their return home by a health visitor, and almost invariably had benefited considerably in health.

Articles of sick room equipment were issued on loan as required at the request of general practitioners or hospitals. 459 issues were made during the year, those in most frequent demand being mackintosh sheets (59), bed pans (67), commodes (108), wheel chairs (68), urinals (39), bed rings (14), walking aids (31), bed rests (30).

(4) Cervical Cytology Clinic

During the year 810 women attended by appointment to have cervical smears taken for examination for evidence of cancer. This excluded 321 who attended in previous years and were recalled either to ensure that some minor disorder had been corrected or because of unsatisfactory smears on their first visit. Sixty women attended twice during the year 1969 for this reason.

For most of the year, two sessions were held each week one at the central clinic at Avebury the other at Pelhams Clinic, Millhams Road.

Three cases of cancer of the cervix were discovered and 27 other patients referred to their own doctors for further examination or investigation or because of minor disorders.

The women attending the clinics were also offered a simple test for the discovery of sugar or protein in the urine, and 12 were referred to their general medical practitioners as a result of this.

Mental Health Service

Since October 1963, Bournemouth patients requiring hospitalization for mental disorder have been admitted to Herrison Hospital and St. Ann's Hospital in the case of mental illness and to Tatchbury Mount, Coldeast and Coldharbour Hospitals in the case of mental subnormality. There have only been very occasional departures from these general arrangements, when an admission has been made direct to a subsidiary of a major hospital or a special arrangement has been made to meet special circumstances as in the case of a visitor to the town who might be re-admitted to a hospital in his home area.

Co-operation with the hospitals has been excellent, but the shortage of accommodation has often led to delays in the admission of patients, particularly those in the older age groups and those suffering from subnormality.

Admissions to Mental Hospitals, 1969

There were 610 admissions to mental hospitals arranged by mental welfare officers of the department, and of these 355 (58·2%) were of patients who had been in a mental hospital before. This high re-admission rate is largely responsible for the great increase in total admissions, which are half as much again as they were ten years ago, and the recent trend in admissions and re-admissions is shown in the accompanying table :—

RE-ADMISSIONS TO MENTAL HOSPITALS

1958	Total admissions	378	Re-admissions	120	Percentage	31.7%
1959	,,	373	,,	131	,,	35.1%
1960	,,	393	,,	140	,,	35.6%
1961	,,	450	,,	160	,,	35.6%
1962	,,	425	,,	146	,,	34.4%
1963	,,	418	,,	158	,,	37.8%
1964	,,	420	,,	175	,,	41.7%
1965	,,	415	"	150	,,	36.1%
1966 1967	,,	465	,,	214	,,	46.0%
1968	,,	552 615	"	290	"	55.0%
1969	,,	610	,,	360	,,	58.5%
1707	,,	010	,,	355	,,	29.7%

It is perhaps significant that 58 of the 355 re-admissions had to return to hospital within a month of their previous discharge and a further 95 within 6 months of discharge, and these are obviously priority groups meriting intensive after-care by the social workers. To suggest, however, that better after-care would eliminate re-

admissions is to over-simplify the problem, for many of these patients discharged themselves from hospital against medical advice, while others returned home to domestic and financial problems defying solution.

Re-admissions to Mental Hospitals

Of the 355 re-admissions during the year

58 v	vere re	-admitted	d within	1 month of discharg	ge
95	,,	,,	,,	6 months ", ",	
68	,,	,,	,,	12 ,, ,, ,,	
91	,,	,,	,,	5 years ,, ,,	
43	,,	,,	over	5 years after discha	rge

ADMISSIONS TO MENTAL HOSPITALS DURING LAST 10 YEARS

Year	N.D.	V.	T.	Section 11	Section 14 etc.	Section 20	Total
1960 1.1.60— 31.10.60	125			— Mental	10 Health	196 Act	331*
	lnf.		<i>Sect.</i> 60	Sect. 29	Sect. 26	Sect. 25	>393
1960 1.11.60— 31.12.60	28			6	4	24	62*]
1961	146		1	111	17	175	450
1962	169		4	93	4	155	425
1963	169		4	105	15	125	418
1964	225		3	41	12	139	420
1965	245		4	50	9	107	415
1966	279		9	47	9	121	465
1967	364		4	49	8	127	552
1968	436		4	73	8	94	615
1969	439		8	67	5	91	610

^{*} The Mental Health Act, 1959, came into operation on 1st November 1960.

ALL PATIENTS ADMITTED TO HOSPITAL DURING 1969 UNDER MENTAL HEALTH ACT

	Males				Females						
Age Group 10–20	Inf. 8	Sect. 26	Sect. 25 1	Sect. 29 2	Sect. 60	<i>Inf</i> . 13	Sect. 26 —	Sect. 25 2	Sect. 29 5	Sect. 60	Total 31 (17)
20-30	36	2	5	7		46		9	10		115 (93)
30–40	26		4	2	5	33		4	2	_	76 (96)
40-50	40	1	2	4	1	34	1	18	6		107 (108)
50-60	28		7	1	2	42	1	11	3		95 (87)
60-70	22		5	1		40		13	8		89 (113)
70-80	21	_	1	6		31		5	7		71 (69)
80+	7	_	2	1	_	12	_	2	2		26 (32)
	188	3	27	24	8	251	2	64	43		610 (615)

Figures in brackets indicate comparative numbers for 1968.

The Work of the Mental Welfare Officers/Social Workers

During 1969 the Head Social Worker and five mental welfare officer/social workers made 5,780 visits compared with 6,753 in 1968, the reduction in the volume of work being explained by the fact that the fifth appointment did not become operative until September. There is, in fact, a chronic shortage of officers of this type so that the full establishment was never achieved at any time during the year and much of the time the service was seriously undermanned. In spite of this, attendances were made at case conferences and discharge conferences and in this way a close liaison was maintained with the hospital psychiatrists.

In addition to their work arranging the admissions of 610 cases to hospital the mental welfare officer/social workers had an aggregate case load of 646 patients for after-care visiting, and were also responsible for listing and safe-guarding the property of patients admitted to hospital, finding lodgings for many discharged patients, and frequently accompanying patients to hospital, to out-patient clinics and to various social agencies.

Transport Arrangements

The Department has a contract arrangement with a local car hire firm to take patients to hospital for admission, but during the year 69 patients required ambulance transport which was arranged through the Ambulance Officer.

Receiverships

The Medical Officer of Health was appointed by the Court of Protection as Receiver for the estate of one further patient subject to the provisions of the Mental Health Act, 1959, making a total of 5 in all.

Mental Hostels

Three mental hostels were in operation during 1969, "Beaufort House", "Wallfield" and "Leven House" (opened 11th June, 1969), providing between them accommodation for 10 male and 43 female patients. At the end of the year 42 patients were in residence, 26 of them being psychiatric cases and 16 cases of mental subnormality. Throughout the period the staffing arrangements were extremely precarious, so much so that beds had to be left unoccupied, and

"Beaufort House" had to be closed completely from 16th June to 29th August, 1969.

There can be no great optimism that the staffing arrangements for the mental hostels will improve in the foreseeable future, as there is a national shortage of suitably trained men and women willing to accept the long hours and heavy responsibilities of this sort of work. To a large extent working short-staffed tends to be self-defeating, for the limited time is spent in attending to the patients' material needs, and the most important part of the work, their social rehabilitation, largely goes by the board.

Details of patients in residence are as follows:—

	In Residence 1.1.69	Admissions	Discharges	In Residence 31.12.69
Beaufort House (Females) (to 10.6.69) Beaufort House (Males)	13	11	24	_
(from 11.6.69)	-	14	7	7
Wallfield (Females)	17	22	23	16
Leven House (Females) (from 11.6.69)		51	32	19

Admissions of Patients to Mental Hostels during 1969

Source of admission			House''	"Wallfield"	"Leven House"
Hospitals Private address Inter Hostel		3 11 —	4 3 4	4 7 11	21 22 8
Reason for admission Rehabilitation Accommodation Inadequacy Temporary crisis Inter Hostel	• • • • • • • • • • • • • • • • • • • •	7 4 3 —	4 2 1 —	4 4 1 2 11	29 9 5 8
Age on admission Under 20 years 20–29 years 30–39 years 40–49 years 50–59 years 60–69 years over 70 years		1 4 3 2 2 2 —	2 3 1 3 2	3 4 1 8 6	3 5 10 7 10 9 7

Discharges from Mental Hostels during 1969

In view of the staffing difficulties experienced throughout the year, and the limited opportunities for intensive social rehabilitation of the hostel patients, some remarkably effective work was done by the small staff and a surprisingly high number of patients successfully returned to the community. Where patients were without homes or relatives of their own, it has been the policy of housemothers to find suitable lodgings for them near to the hostel, so that they can maintain contact with the staff and other residents and return for occasional meals or entertainments.

SUMMARY OF DISCHARGES DURING 1969

	"Beaufort House" (Female)		''Wallfield''	"Leven House"
Total discharges	24	7	23	32
To private address and	27	,	23	J 2
employment	1	1	2	7
To private address		<u>.</u>	$\overline{2}$	8
To general hospital			1	_
Return to hospital		4	4	4
To Old People's Home			1	1
To private address and				
attending Training				_
Centre		2	3	7
To residential employ-				
ment			l	2
Inter Hostel	23		8	
Died			1	3
Length of stay in hostel				
Under 1 week		4	3	5
1–4 weeks	1	3	3	8
1–3 months		—	4	10
3–6 months		—	2	1
6–9 months		_		2
9–12 months				1
Over 1 year			3	3

"APRIL COURT"

Work commenced in May, 1969 on the erection of a fourth hostel, "April Court" in Poole Lane, on a site owned by the Corporation, and situated within about ½ mile from the purpose-built Adult Training Centre "West Howe Industries" whose construction was started at about the same time. "April Court" will provide 20 places for residents of both sexes, most of whom will be employed at "West Howe Industries", thus constituting a further valuable contribution towards the Council's plans for community services among the mentally disordered.

The provision of further Hostels

At the time of writing, approval in principle and loan sanction has been received from the Department of Health and Social Security for the erection of a fifth hostel in the grounds of the Herbert Day Hospital in Alumhurst Road. Details of the appropriation of a site have still to be arranged with the Wessex Regional Hospital Board and detailed plans to be approved by the Department of Health and Social Security.

Mental Subnormality

During the year twenty four new cases of mental subnormality were reported, six of them being children who were reported by the Education Authority as being unsuitable for education at school.

The position at the end of the year was that 406 cases of mental subnormality were on the authority's registers, as follows:

* In hospitals Attending the Turner Training	g Cent	re and l	iving a	it home	 	146 115
Living in local authority hoste	el				 	16
						1
and the same of th						126
Resident in private homes						2
						106
						406

^{*} The majority of cases in hospitals (approximately 88) were at Coldeast and Tatchbury Mount Hospitals.

Nine persons suffering from mental subnormality were admitted to hospitals.

In addition, 9 persons were admitted to hospital and two to hostels for short periods in order to give their parents a short period of freedom from worry, or a holiday.

No deaths were notified among mentally subnormal persons.

At the end of the year one case awaited urgent hospital admission, and there were five less urgent cases on the waiting list.

Arrangements for Training Mentally Subnormal Children and Adults in the Community

Although during 1969 both children and adults continued to attend the Turner Training Centre in Alma Road, run in two separate sections, progress was already being made for the construc-

tion of a purpose built Adult Training Centre off Poole Lane, on the site of the old Elliotts' Brickworks, and this transfer of 92 men and women over the age of 16 years was finally achieved in June, 1970.

The future of the younger children at the Turner Training Centre was also affected by the Government's decision to transfer Junior Training Centres from Health to Education Departments thus avoiding the necessity to exclude any child from school, and though this transfer has not yet taken place, its imminence has been reflected both in the staffing of the Junior Training Centre and in the training curriculum. When eventually in early 1970 the organisation of the Junior Training Centre was changed, the Council appointed a former Headmaster of a school for educationally subnormal children to take charge, with the full knowledge and approval both of the Department of Education and Science, and of the Bournemouth Education Department.

On the adult side, the emphasis has been more and more on factory-type work, in wood, metal and plastic, together with facilities for further education and (for the women) in domestic subjects. Sub-contract work from a number of local firms has been extended considerably and all adult trainees now receive a small financial return for their work, paid weekly.

During the year 19 adults found jobs in open industry, 18 of these being psychiatric cases, and one of subnormal mentality.

During the year 38 juniors and 63 adults received a dental inspection; 21 juniors and 36 adults were found to require treatment. 30 of this total were subsequently treated at the East Way Clinic, involving a total of 81 attendances. A further 12 were referred for treatment under general anaesthesia at the hospital and are awaiting admission.

NURSING HOMES

At the end of the year 38 nursing homes were registered by the local authority, the same as in 1968, providing accommodation for 482 medical and surgical cases, and for 21 maternity cases. Two of the nursing homes were approved by the Department of Health and Social Security for the purposes of the Abortion Act, 1967.

Bournemouth Crematorium

Since the opening of the Crematorium in 1938, there has been a steady increase in this method of disposing of the dead, the yearly totals being:—

1938				229
1939	• •	• •		384
1940	• •	• •	• •	514
1941	• •	• •	• •	557
1942	• •	• •	• •	584
1942	• •	• •	• •	693
	• •	• •	• •	708
1944	• •	• •	• •	742
1945	• •	• •	• •	
1946	• •	• •	• •	834
1947	• •	• •	• •	1026
1948	• •	• •		1012
1949				1155
1950				1306
1951				1484
1952				1472
1953				1681
1954				1770
1955				1991
1956				2142
1957				2207
1958	• •	• •	• •	2340
1959	• •	• •	• •	2472
1960	• •	• •	• •	2609
1961	• •	• •	• •	2648
1962	• •	• •	• •	2873
1962	• •	• •	• •	3171
	• •	• •	• •	
1964	• •	• •	• •	3095
1965	• •	• •	• •	3192
1966		• •		3514
1967		• •		3493
1968				3938
1969				3909

An analysis of the statistics for 1969 showed that 44 per cent. of applications for cremation came from within the Borough, while 56 per cent. were received from other areas.

The Medical Officer of Health is the Medical Referee to the Crematorium, and in an emergency has two deputies authorised by the Home Office, the Deputy Medical Officer of Health and a retired Assistant Medical Officer of Health.

NATIONAL ASSISTANCE ACT, 1948, SECTION 47

Action was taken under this Section of the Act in four cases, the highest annual total ever recorded in Bournemouth. The circumstances requiring such extreme action are briefly those in which an ill or aged person is living in insanitary conditions and is not receiving proper care and attention, and under the arrangements at present in force the Magistrates make a personal visit before confirming the Order. These cases are distressing in the extreme for all parties concerned but it seems almost inevitable that as the proportion of old people in the population increases more cases of this type will come to light. Brief details of the four cases are as follows:

- Mr. L. C. Aged 69 years. Living alone in insanitary conditions. Admitted to an Old Persons Home under a Magistrate's Order.
- Mrs. P. V. D. Aged 94 years. Living alone in two squalid rooms in insanitary conditions and also suffering from physical disabilities. Admitted to an Old Persons Home under a Magistrate's Order.
- Mrs. A. S. Aged 83 years. Living alone in one room in insanitary conditions and also suffering from physical disabilities including blindness. Admitted to a Chronic Sick Hospital under a Magistrate's Order.
- Mrs. A. M. R. Aged 88 years. Living alone in insanitary conditions. Was very feeble and unable to look after herself. Admitted to a Chronic Sick Hospital under a Magistrate's Order.

NATIONAL ASSISTANCE ACTS, 1948 - 1951 — INCIDENCE OF BLINDNESS

The registration of blind persons and the provision of welfare services for this category of disabled persons is carried out by the Welfare Services Department, and the following information in respect of new registrations has been supplied by the Director of Welfare Services:—

(i) Number of cases registered during the year in	Cause of Disability					
respect of which para. 7(c) of Forms B.D.8	Cataract	Glaucoma	Retrolental Fibroplasia	Others		
recommends:— (a) No treatment (b) Treatment		1		35		
(Medical, Surgical or Optical)	9	9		25		
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	7	9		25		
				23		

Public Health Laboratory Service REPORT BY Dr. G. J. G. KING SPECIMENS RECEIVED FROM BOURNEMOUTH, 1969

SIECHVIENS	RECEIVED	L. I	COM	ВО	OKINEIV	100111
Public Health	Department					
					818	
	s and urine	• •	• •	• •		
	and throat	• •	• •	• •	12	
	human		• •	• •	3	
	and shellfish		• •		285	
Ice-cre	eam				255	
Milk					319	
Water					644	
Other	sanitary				204	
	Ž					2,540
General Practi	itioners					
Bronc	hitis				2	
	s and urine	• •	• •	• •	3,116	
			• •	• •	192	
		• •	• •	• •	678	
			• •	• •		
Blood			• •	• •	141	
Sputa			• •	• •	2 5	
Food			• •		5	
						4,136
Bournemouth	Chest Clinic					
	ngeal swabs				1,895	
	: Direct	• •	• •	• •	1,050	
Sputa	Culture	• •	• •	• •	296	
T.T		• •	• •	• •	51	
Urine		• •	• •	• •	4	
	chitis	• •	• •			
Blood			• •		31	
	human		• •		9	
Pleur	al fluids				1	
Nose	swabs			• •	2	2.200
						2,290
Royal Nationa	al Hospital					
Brone					46	
	ngeal swabs	• •	• •	• •	856	
	al fluids	• •	• •	• •	135	
		• •	• •	• •	20	
Sputa	a: Direct	• •	• •	• •	2,224	
T7	Culture	• •	• •	• •	839	
	es and urine	• •	• •	• •		
	r human		• •	• •	64	
Blood	ds	• •	• •	• •	357	4,541
						4,541
Royal Victori	a Hospital					
	es and urine				300	
		• •	• •	• •	374	
_	e typing	• •	• •	• •	80	
Sera	1	• •	• •	• •	222	
	r human		• •			
Nose	and Throat			• •	88	1.064
						1,064
				Τ	otal	14,571
				1	Jul	

Water Supply

The greater part of the Borough is served by the Bournemouth and District Water Company, the remainder by the West Hampshire Water Company. Throughout the year, both supplies have been satisfactory, both as regards quantity and quality, and 456 samples were submitted to the Public Health Laboratory by the district public health inspectors from the mains supplies, with completely satisfactory bacteriological results.

The bulk of the water supplied to the Borough is drawn from local rivers, particularly the Avon, and there is no traceable content of fluoride in the water as supplied.

I am indebted to the General Manager of the Bournemouth and District Water Company and to the Chief Engineer of the West Hampshire Water Company for the following information:—

		Bournemouth and District Water Co.	West Hants Water Co.
(a)	Quality and quantity of water supply throughout the year.	Satisfactory.	Satisfactory.
(b)	Action taken in respect of any form of contamination	No specific action (other than sections of mains	sterilisation of
(c)	Number of dwelling houses supplied from the public water mains (i) direct to houses	50,037	6,826
	(ii) by means of stand-pipes	None	None

SEWERAGE AND SEWAGE DISPOSAL

In previous Annual Reports reference has been made to the progress of the scheme for diverting all sewage from the Borough to inland treatment works and the complete elimination of sewage from the Bay. The Borough Engineer has kindly supplied me with the following additional information:—

Sewerage and Sewage Disposal

The latest report from the Borough Engineer on the progress of the Scheme for diverting all Sewage from the Borough to Inland Treatment Works, thus eliminating the discharge of sewage to the bay is as follows:

Contract No. 1 and No. 2 are completed. Contract No. 3 at £1·1 m. is 60% completed, but will continue until mid-1971. Contract No. 5 for the Major Pumping Station near Bournemouth Pier has commenced but will not be completed until April 1972. (The Scheme now includes a road fly-over and complete pedestrianisation of the Pier Approach). Although the main contracts for the essential extension of the Purification Works are not yet let, the machinery is all on order and some has already being installed into existing tanks.

Main drainage is now being provided for a small area covering 66 houses near Muscliff/Broadway Lane.

Drainage proposals for a new road are under consideration using methods which would afford relief to other areas currently subject to some flooding in times of heavy and prolonged rainfall.

Report by A. J. Mortimer Meteorological Registrar

1969 Summary

A year of exceptionally good weather, both for the holiday-maker and the farmer — this is the verdict on 1969, which although lacking in sunshine during the first quarter of the year, made up for this to such an extent that there was a slight favourable surplus on the year's average.

The year opened with the third mildest JANUARY of the century, a month with less than the normal amount of sunshine, continuing the unfortunate pattern of 1968. FEBRUARY, however, brought one of those weather surprises so characteristic of the British climate, with three weeks of wintry weather and the coldest day of the winter. Although some snow fell on nine days it never at any time interfered with traffic, although most of the country suffered severely in this direction. The shortage of sunshine continued in to MARCH, the second most sunless March since records were taken locally — in short, since the beginning of the century. It was also cold, with a predominance of winds from an easterly quarter. APRIL began the adjustment of the balance so far as sunshine was concerned, with the best record for sunshine since 1954, a total of 223.8 hours. It was a dry month, with only half the normal rainfall and very low humidity. MAY, as has been the case for the last two years, was disappointing, cool and wet with rainfall nearly twice the average, sunshine well below and a mean temperature below normal. This fortunately was only a temporary set-back, for JUNE was brilliantly sunny, with only three-quarters of an inch of rain and a minor heatwave in the middle of the month. JULY continued with excellent holiday weather, sunny, warm and without thunderstorm conditions. AUGUST was another excellent holiday month mainly sunny and warm with thundery conditions on two days, the second culminating in a storm which continued all night from the 9th to the 10th and returned briefly in the afternoon. SEPTEMBER was a delightful month of that quiet mellow weather which occurs in early autumn and OCTOBER continued this pleasant trend, breaking records for dryness, with only 0.18 inches of rain all the month. As the previous driest October showed 0.57 inches, this record is likely to stand for some time, It was also one of the four warmest October of the century with above average sunshine.

NOVEMBER too was sunny and mild with a maximum temperature on one day of 63° which has only once before been equalled in November. In DECEMBER the long-range weather forecast warned of the possibility of a white Christmas and when slight snow fell on the 18th it looked as if the forecast would prove correct. Christmas Day and Boxing Day, however, were sunny and mild with a total of 10·2 hours of sunshine in the two days and wintry weather only returned at the end of the month, the year ending dull and cold, with a light covering of snow over the ground.

SUMMARY FOR THE YEAR

80° on the 15th July Highest temperature recorded 22° on the 16th February Lowest temperature recorded Greatest fall of rain in one day . . 1.22 inches on 14th November 29.19 inches (average 31.21 inches) Total rainfall Total rainfall Total sunshine 1789.4 hrs. (average 1726 hrs.) Number of days with sunshine Number of days with rain ... 146 50.4° (average 50.9°) Mean temperature

BOURNEMOUTH CLIMATOLOGICAL STATION

Latitude 50° 44'N. Longitude 1° 53'W. Height above Mean Sea Level 130 ft.

1. TEMPERATURE (Degrees Fahrenheit)

	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average 1969	44.5	40.5	44.0	48.6	53.8	59.4 58.2	62.4	62.4 62.5	58.5	52·2 56·3	46.0	42.3
Absolute Maximum	53 (22)	50 (23)	53 15/19/31	(6)	(12/13)	10/11/12	80 (15)	77 (8)	72 (3)	71 (9)	63 (2)	54
Absolute Minimum	28 (1)	22 (16)	27 (9)	31 (3)	37 (20)	39 (5)	46 (30)	47 (24)	40 (28)	36 (30)	27 (18)	28 (1/6)
Mean Range	7.9	10.2	11.0	15.2	12.0	16.3	15.8	13.3	12.6	12.2	11.4	10.1
Humidity %	91	91	68	73	81	7.1	75	92	85	88	85	91

Mean Temperature for 1969 — 50.4 Average (Air Ministry) — 50.9

2. SUNSHINE (Hours)

	Jan.	Feb. Mar.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average 1969	65 45.5	82 90.7	133 77.7	185 223·8	218 196·3	230 295.2	213 268·8	206 181.5	150 116·8	116	71 107.5	57 56.6
Daily Average (1969)	1.47	1.47 3.24	2.51	7.46	6.33	9.84	8.67	5.85	3.89	4.16	3.58	1.83
Highest amount in one day Date	6.0 (31)	9.1	10.2	13.4 (29)	14.2 (22)	14.3 (10)	14.6 (15)	13.3	10.9	9.4 (26)	8.4	7.2 (13)
Days with sunshine	19	22	20	29	29	30	29	31	25	27	26	16
Total for 1969 — 1789-4	or 1969	- 1789		Average (Air Mnistry) — 1726	(Air M	nistry)	- 1726		-			

3. RAINFALL (Inches)

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	3.56 4.40	2.28	2.06	2.00	3.08	1.56	2.22	2.47	2.50	3.46	3.74 5.20	3.46
Daily Average	.142	-064	660-	.033	660-	.026	690-	-052	.059	900-	.173	.135
Greatest fall in one day Date	0.62 (27)	0.48 (19)	0.84	0.34 (21)	0.60 (25)	0.36 (17)	(9)	0.72	0.66	0.06 (12)	1.22 (14)	1.20 (14)
No. of days with rain	22	14	14	6	91	10	4	~	6	9	17	17

Total for 1969 — 29·19

Average (Air Ministry) — 31-21

Environmental Hygiene

Report by G. A. Morgan, B.E.M., M.R.S.H., M.A.P.H.I., Chief Public Health Inspector

The following report on the work carried out by the Environmental Health Section during 1969 indicates that once again the main efforts were directed to the maintenance of acceptable standards in food premises, houses in multiple occupation, offices and shops.

The number of complaints received in the office has again increased and, for the first time, the number of complaints about general environmental circumstances was higher than that relating to purely housing defects. This trend may well be maintained in future years as the public becomes more conscious of modern environmental problems, such as noise and smoke emissions and other circumstances arising as a result of technological progress.

Several new pieces of legislation were added to the Statute Book and, whilst one welcomes particularly additional power to assist in controlling atmospheric pollution, the responsibility placed upon the Council in implementing The Housing Act, 1969 is likely to have the most far-reaching effects upon the Section. It appears probable that work in connection with the improvement of houses and rent control will require at least as much of the Inspectors' time as the work in connection with houses in multiple occupation. Mention of the first survey for the purposes of the new Act has been made later in this report.

For several years this report has stressed the need for improved education in food hygiene amongst persons engaged in the food trades. The Section's work in this field has increased substantially during 1969. A solid basis has now been created to enable the public health inspectors to increase their work of health education and thereby make a substantial contribution to the prevention of food borne illness in the Town.

In concluding the introduction to this report I should like to acknowledge the support and considerable help which I have received from my Deputy, Mr. A. R. Hutt, and to express my appreciation of the work of both the inspectorial and clerical staff.

Inspection and Visits

watt								
	o obtain samples o							
Т	examination o obtain samples o	of water for	chemica	 al and	 bactei	 riologia	 ral	381
	examination at sw	imming bath	s and pa	ddling	pools			191
Food	Supply							
	* * *	1 1 1						
	Hotel and Boarding H Cafes and Restaurants					• •		1,472
	factory Canteens			• •		• •	• •	501 25
Ŝ	chool Feeding Centre	es	• •	• •		• •	• •	25
E	Sakehouses		• •					109
	food preparation pren	nises	• •					166
	hops re sale of food		• •		• •		2	2,159
	talls and delivery veh					• •	• •	121
	Dairies and Milkshops hops for other sampl			• •		• •	• •	304 565
	Dairies and milk distri						• •	46
P	asteurising plants	prom	• •	•	• •			34
P	remises used for the	manufacture,	storage	and sal	le of ic	e crean	n	252
N	Teat markets and cold	d stores	• •	• •	• •	• •	• •	82
4 .								
Atmo	spheric Pollution							
S	moke observations			• •				112
V	isits to premises			• •	• •			172
Hous	ing Conditions							
P	rimary inspections of	f dwellinghou	ises (unc	ler Put	olic He	alth A	ct.	
	1936 and Housing	g Act, 1957, e	tc.)	• •	• •	• •	1	1,634
	ubsequent inspection:	s of dwellingl	nouses	• •			2	2,051
ŀ	Houses in multiple occ	- '	-					120
	1969)	• • • •	• •	• •	• •	• •		1,132
	Overcrowding Caravan sites and indi	··· vidual carava	ne	• •	• •	• •	• •	26 112
(aravan sites and mur	viduai carava	.115	• •	• •	• •	• •	112
Осси	pational Condition	18						
								579
r L	factories Homes of Outworkers	• • •		• •	• •	• •	• •	578 29
S	hops re Shops Act, 1	950 Young F	ersons (Emplo	 vment)	Act	• •	307
	oung Persons (Employer)							5
C	Offices, Shops and Ra	ilway Premise	es Act, 1	963	• •	• •	1	,740
Infec	tious Diseases							
	rimary visits after no			• •		• •	• •	40
	ubsequent visits and			• •	• •	• •	• •	663

General Sanitary Conditions

Hairdressing establishments					 222
Noise nuisances					 486
Nuisances other than the above				• •	 1,511
Nursing homes, day nurseries, etc.					 91
Pet shops					 36
Piggeries and swill-boiling plants					 76
Places of entertainment					 64
Premises for the examination of dra	ins	• •			 1,098
Private Sanitary Inspections					 23
Refuse accommodation		• •			 337
Sale of poisons					 51
Swimming Baths				• •	 118
Verminous premises			• •	• •	 135
Miscellaneous					 1,123

Food Supply

During the past few years the number of inspections made to food premises has increased annually and this trend was maintained in 1969. As a result of over 5,800 visits to premises where food is sold, prepared or served, it was necessary to draw attention to contraventions of the Food Hygiene (General) Regulations, 1960 on 153 occasions. Very few contraventions detected were of a serious nature and at the end of the year only six informal notices remained outstanding.

This is considered to be a satisfactory position but it should be remembered that the Regulations set out a minimum standard which food traders must maintain. It should be the aim of management, food operatives and the Public Health Inspectorate to achieve a general standard, higher than the legal requirements, throughout the town. There is every reason to believe that the food trade in Bournemouth is well aware of this and much is being done by management to ensure that the food served in the town is safe to eat and of a quality consistent with that which might be expected in a first-class holiday resort.

Any attempt to raise the standard of food handling can never be more than partially successful, however, if efforts are confined to the improvement of premises alone. The training of staff in food hygiene is equally, if not more, important. The work of Health Education to this end continues to increase, but there remains much

to be done. The dreation of Industrial Training Boards will facilitate the work and there is no doubt that the Inspectorate will become increasingly involved in training schemes arranged by various organisations. 1969 saw the start of practical co-operation in the training of food operatives when trainee managers on four-month Training Board Courses in Bournemouth received six hours instruction in food hygiene from Public Health Inspectors.

During the year the Council, together with Poole Council, initiated food hygiene courses and agreed to issue a certificate to all food operatives attending courses and passing the final examination. Two courses were arranged in the latter part of the year and were over-subscribed; one can therefore confidently look forward to the continuation and expansion of this work. The award of certificates by the two Councils is an innovation and as far as is known is done nowhere else in the country; it is hoped that a Bournemouth/Poole Certificate in clean food handling will become recognised as a worth-while qualification by the food trade.

Measures taken to comply with the Food Hygiene (General) Regulations, 1960:

No. of Premises cleansed	 106
No. of Premises where equipment cleansed	 110
No. of Wash-hand basins provided	 16
No. of cases where hot water facilities improved	 73
No. of First-aid kits provided	 20
No. of Premises where walls repaired	 61
No. of Premises where floors repaired	 76
No. of Premises where working surfaces repaired	 66
No. of Premises redecorated	 78
No. of Premises where accommodation for clothing provided	 2
No. of Premises where sanitary accommodation improved	 11
No. of Premises where notices were provided	 49
No. of Premises where waste storage improved	 27
No. of other contraventions remedied	 387

Meat Inspection

There is no doubt that the time is not far distant when the bulk of food imported into this country will arrive in containers to be opened, not at our ports as hitherto, but at inland distribution centres. This will place upon the local public health inspectors responsibilities for the control of imported food at present largely in the hands of port health authorities.

The effects of this development are already noticeable in Bournemouth in that some twenty to thirty tons of meat arrives at the Meat Depots in containers every week. Close co-operation

exists between the Department and Public Health Officers at the port of entry and a system of notification of the passage of containers through ports has been developed and is working satisfactorily. Additional routine visits to meat depots are also made by the Inspectors at times when regular arrivals are expected.

No doubt containerisation of food will bring its associated problems, but, to date, experience in Bournemouth suggests that the reduction in handling, inherent in the system, works to the benefit of the consumer.

The supervision of treatment of carcases affected by cysticercus bovis, which involves the refrigeration of the meat, continues to be a Departmental responsibility, but only one carcase was received into cold stores in Bournemouth this year.

Milk Supplies

There has been a trend in recent years to increase the number of retail outlets for the sale of pre-packed milk and this continued in 1969. 31 licences were granted to traders, who wished to sell designated milk, as follows:—

Pasteurised	 	 	24
Sterilised	 	 	11
Ultra Heat Treated	 	 	11

There were 397 licensed milk vendors operating in the town by the end of the year.

Milk is pasteurised in the Borough at two dairies which serve the town and neighbouring areas, whilst another dairy located in Poole provides a similar service. Sterilised milk is treated in Bristol and distributed by the local dairy firms.

During the year, routine inspections of the pasteurisation plants were carried out on 34 occasions. 303 samples of designated milks were submitted to the Public Health Laboratory for bacteriological examination and 10 samples of pasteurised milk failed the Methylene Blue Test. All such failures were immediately investigated and minor faults in the processing and distributing arrangements received attention from the milk processors.

24 series of bottle and churn rinses were submitted for bacteriological examination and results which were generally satisfactory provided a useful indication as to the efficiency of washing machinery.

Ice Cream

As in most holiday centres, the consumption of ice cream in Bournemouth is high. 13 additional premises were registered for the sale of ice-cream in the course of the year, bringing the number of registered retail outlets to 579. This figure does not include premises where ice cream is served only as a part of a meal.

Ice cream is recognised as a food capable of conveying the organisms causing food borne disease and impeccable standards of hygiene are required at production points, during distribution and at retail outlets. Few managements are more aware of their responsibility to produce safe food than ice cream manufacturers and it is the public health inspector's duty to ensure that a similar dedication to hygienic practice is maintained throughout the distribution chain. The chart hereunder indicates clearly that, upon examination by the bacteriologist, ice cream served loose from cans is much more likely to produce an unsatisfactory result than the pre-packed product. A great deal of work is still required by both inspectors and management to ensure that a properly designed hygienic drill is always carried out at serving points.

Number of Samples taken — 225

	Grades I and II	Grade III	Grade IV
No. of samples of pre-packed ice-cream placed in Grade	92	5	4
No. of samples of loose or soft ice-cream placed in Grade	103	9	12
TOTAL	195	14	16
percentage of samples placed in Grade	87%	6%	7%

It must be emphasised that the placing of a sample in Grades III or IV is not an indication that the ice cream is unsafe to eat. It is a warning that the method of production or handling leaves something to be desired. Only when a series of samples produce unsatis-

factory results does a serious situation arise. Bournemouth has not had such a situation for many years.

Prepared Foods

It is necessary for persons who prepare or manufacture meat or fish, or preserve these foods by any means, including cooking, to register their premises with the Council. This statutory requirement is a legal recognition that such foods are often a significant factor in the spread of food poisoning. The Council approved 7 additions to the register in 1969 and, at the end of the year, 192 premises were registered under the Act.

106 samples of meat and fish products were submitted to the Public Health Laboratory during the course of the year and all were reported to be bacteriologically satisfactory. Most of the samples submitted were purchased at retail outlets and this programme thus provided a useful check, not only on production methods but also as to the standard of food-handling between the manufacturer and the consumer.

Other Foods

The sampling programme to check on the hygienic standard of food handling extends to foods other than meat and fish products and, during the year, 122 samples of other foods were submitted to the Public Health Laboratory and produced very satisfactory reports.

Foodstuffs Condemned

The Department continued to assist the food trade by accepting the voluntary surrender of unsound food. Traders notify the Public Health Inspector when they have foodstuffs they know to be, or suspect may be unfit, and, after inspection, the food is surrendered to the Council for destruction by appropriate means. A certificate of unfitness is issued by the Inspector to the trader. During 1969 the following amounts of food were condemned in this way:

Description			Tons	Cwts.	Qtrs.	Lbs.
Fish				16	0	17
Meat	• •	• •	5	10	0	20
Tinned Foods		• •	6	Ô	ĺ	14
Other Foods	• •	• •	4	5	î	16
			16	3	0	11

The total figure is nearly 10 tons lower than that of 1968 but an unusually large amount of food was condemned during that year, one consignment of imported potatoes accounting for 40% of the total amount.

Adulteration of Food and Drugs

(a) Milk

232 samples of milk were subjected to the Gerber Test in 1969. This work is carried out by the Inspectors and involves separating the milk using a centrifuge. An accurate check can then be made to ascertain if the composition of the milk conforms to the statutory standards. All milk tested during the year complied with the legal requirements.

Milk Samples subjected to Gerber Test

"Pasteurised" Milk	• •	• •		• •	126
"Channel Islands" Mil	k				90
"Homogenised" Milk			• •	• •	14
"Sterilised" Milk	• •	• •	• •	• •	0
"Ultra Heat Treated"	Milk		• •	• •	2
					232

(b) Other Food and Drugs

201 samples of food and drugs were submitted to the Public Analyst who reported as follows:—

	FORMAL	SAMPLES	Informa	L SAMPLES	
	Reported Genuine	Reported Adulterated or unsatisfactory	Reported Genuine	Reported Adulterated or unsatisfactory	Total Samples
Food	3	3	166	8	180
Drugs			21	_	21
Total	3	3	187	8	201

Eleven samples were reported as unsatisfactory and were dealt with as follows:—

Ref. No.	Samples	Nature of Offence or Adulteration Formal Samples	Action taken
657	Gin	Excessively diluted with water	Prosecution instituted.
660	Pork Sausage Meat	Deficient of meat	Manufacturer warned.
659	Malted Milk Biscuits	Misleading description	Manufacturer contacted and agreement reached.
		informal Samples	
39	Salad Cream	"Off flavour" top one third of bottle	Voluntary surrender of remaining stock.
		discoloured	
63	Margarine	Deficient of Vit. A and partially dehydrated	Formal sample taken and proved satisfactory.
71	Malted Milk Biscuits	Misleading description	Formal sample taken.
98	Pork Sausages	Deficient of meat	Formal sample taken and proved satisfactory.
97	Pork Sausage Meat	Deficient of meat	Formal sample taken.
84	Aspic Powder	Spoilage by moisture	Stock withdrawn from sale.
108	Medicinal Powdered Raw Grain	Claims on packet could be misleading	No action open to Council under the Food and Drugs Act, 1955.
206	Boned Chicken in Jelly	Meat content not more than 75%.	Taken up with manufacturers.

Pesticidal Residues

12 samples of food were submitted to the Public Analyst for examination for pesticidal residues as part of a national research programme, sponsored by the County Councils' Association and the Association of Municipal Corporations.

Atmospheric Pollution

The year 1969 saw the coming into operation of the Clean Air Act, 1968 in two stages — on the 1st April and the 1st October, 1969. This legislation has considerably strengthened the principal Act and repaired many of the omissions which were all too apparent to those who were concerned with the implementation of this legislation.

The emission of dark smoke arising from the burning of trade waste in the open is now controlled by Section 1 of the 1968 Act. However, the combustion of certain materials are exempted from this enactment by the Clean Air (Emission of Dark Smoke) (Exemption) Regulations, 1969, subject to compliance with certain conditions prescribed by these Regulations. There are six categories of material exempted, including waste material from demolition or site clearance and the burning of tar, asphalt or similar materials in connection with the surfacing or re-surfacing of roads or roofs.

The Clean Air Act, 1956 which requires that steps are taken to minimise dust and grit emissions from certain furnaces is extended by the new legislation to include a wider range of plant. The Minister now has the power to prescribe limits for emission of solid particles in respect of particular types of furnaces. Such Regulations have not been made although it is anticipated that limits may be imposed later. Limits may be applied to mobile or transportable furnaces and many furnaces which are mechanically fired, types of equipment which have been exempted from general provisions requiring that grit and dust arrestment plant shall be provided. These exemptions are contained in the Clean Air (Arrestment Plant) (Exemption) Regulations, 1969.

Prior approval of the height of a chimney serving a furnace which was previously controlled by Section 10 of the 1956 Act and by the Building Regulations is removed from Building Regulations Control by Section 6 of the 1968 Act. This improved piece of legislation is now part of the Public Health Code and is designed to control, within certain limits, the build-up of sulphur dioxide at ground level. This gas is the principal pollutant from most forms of fuel used in domestic, commercial and industrial boiler plant.

Consent by a Local Authority to a chimney height can now be conditional to restrict the rate and quality of emissions and applies

to existing chimneys, as well as to new and replacement stacks where the capacity of the furnace has been increased. The earlier legislation did not enable Local Authorities to provide for a change in the type of fuel or other alterations to the boiler plant made after approval of a chimney upon information provided by the installers at that time.

284 visits to premises were made by the District Inspectors in connection with complaints of smoke nuisances, whilst observations on chimneys were made on 112 occasions. Formal action to deal with troublesome emissions was not needed and the Department enjoyed a good measure of helpful co-operation in dealing with nuisances detected.

By arrangement with the Borough Engineer, plans of proposed new buildings were examined before approval to confirm that proposed chimney heights were satisfactory. In very few cases was it necessary to request Architects to amend plans in this connection.

Daily readings of smoke and sulphur dioxide emissions were taken from three stations which have been established in the Borough for some years. In this work the Department co-operates with the Warren Spring Laboratory to produce information for the national survey of atmospheric pollution.

Housing

For some years this Report has indicated that the bulk of the housing work undertaken by the Department has been concerned with houses in multiple occupation. 1969 has seen no change in this position, but a survey of more than 500 houses in the Springbourne Area is a pointer to the extension of housing work which the Council will be expected to undertake following the passing of the Housing Act, 1969.

This Act came into effect on 25th August, 1969, and emphasises a Central Government desire to minimise, as far as possible, the serious problem of unfit housing by preserving and repairing houses suitable for such attention. Local Authorities are encouraged,

at the same time, to improve the general environment in areas containing a substantial amount of sub-standard, but not unfit, housing.

Inspections in connection with this work and with alterations to the rent structure, also contained in the Act, must increase the amount of time spent by Inspectors on housing work. It is hoped, however, that arrangements can be made to accept the additional responsibilities without diminishing the amount of time given to maintaining standards in houses in multiple occupation. Bournemouth can be well satisfied with the results achieved in this field, which bear comparison with any local authority in the country. A high level of routine inspection is essential, however, if standards are to be maintained and the value of the Council's efforts over some years fully realised.

Unfit Dwellings

During the year 11 dwellings were represented to the Council as being unfit for human habitation having regard to the standard laid down by the Housing Act, 1957.

The Council made Orders under the Act as follows:—

Demolition Orders	Section 17	 	 		4
Closing Orders,		 	 	• •	6
Closing Orders,	Section 18	 	 		1

The Council revoked Orders, following the execution of substantial works, as follows:—

Demolition Order	Section 17	 	 	 1
Closing Order	Section 18	 	 	 1

443 visits were made in connection with general housing conditions and overcrowding.

Springbourne Improvement Area

In order that the Council might determine its policy regarding area improvement as envisaged in the Housing Act, 1969, the Department carried out a pilot survey of an area of housing in the Springbourne Area of the town.

The survey was intended to provide accurate information as to the condition of the houses, as to what extent standard amenities were provided in the dwellings and to estimate the proportion of houses capable of being improved by use of the extended grant provisions contained in the new Act.

The designated survey area contains 550 houses and it was possible to inspect 507 houses, a very encouraging result in view of the fact that no formal use was made of the Inspectors' power of entry. The work was carried out during the months of February and April and involved 938 visits by the Inspectorate.

Houses in Multiple Occupation

The following tables set out in detail the work carried out by the Department to apply and thereafter maintain acceptable standards in houses let in multiple occupation.

(a)	Work carried out	
	Number of inspections made (including re-visits) Number of Houses in Multiple Occupation inspected Number of Lettings inspected Number of Informal Notices served Number of cases in which formal action was taken	1,132 36 216 38 12
(b)	Formal Action Taken	
Hou	using Act, 1961	
	Notices requiring provision of satisfactory Means of Escape in case of Fire (Section 16)	1 2 5 2 2
(c)	Results Achieved	
	Number of premises found to be satisfactory Number of premises rendered satisfactory Number of premises where use for multiple occupation was discontinued Number of premises improved	1 44 6 68
mpro	ovements Effected	
	Satisfactory Means of Escape in case of Fire provided Overcrowding in Lettings abated Natural and/or Artificial Lighting improved Means of ventilation improved Personal Washing Facilities provided or improved (a) in lettings (b) by installation of additional bathrooms or showers (c) by reduction of numbers using them Facilities for storage, preparation or cooking of food improved Space heating improved	55 10 11 5 26 4 2

Repairs, etc., carried out

Number of premises in which minor repairs and/or r	·e-	
decoration were carried out	60)
Number of premises in which major repairs or alteratio	ns	
were carried out	8	,
Other defects of management remedied	4	
Additional water-closet provided	1	
Underground rooms made to comply with Regulations	1	

Land Charges Enquiries

A total of 5,129 enquiries concerning various properties received attention during 1969.

Caravan Dwellings

There are 12 licensed caravan sites in the Borough, which provide accommodation for 366 residential and 409 holiday caravans. During the year no new sites were established.

112 inspections were made to caravan sites to ensure that satisfactory conditions were maintained.

Occupational Conditions

Factories

The following tables set out the prescribed particulars on the administration of the Factories Act, 1961:—

Factories Act, 1961. Part I — Inspections.

	Number		Number	of
Premises (1)	on Register (2)	Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	103	14	_	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	665	564	26	_
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	_			
Total	768	578	26	

Cases in which defects were found

	w	No. of cases			
		Reme-	1		prosecu-
Particulars	Found	died	To H.M.	By H.M.	tions were insti-
(1)	(2)	(3)	Inspetr. (4)	Inspctr. (5)	tuted (6)
Want of cleanliness (S.1) Overcrowding (S.2) Unreasonable temperature	8 —	8	_		
(S.3) Inadequate ventilation (S.4) Ineffective drainage of floors	8 —	8 —	_		
(S.6) Sanitary Conveniences (S.7)	2	2	_		_
(a) Insufficient(b) Unsuitable or defective(c) Not separate for sexes	1 53 5	1 57 5	_ _ _	9	
Other offences against the Act (not including offences relating to Outwork)	40	43	2	_	· —
Totals	117	124	2	9	_

Outwork (Sections 133 and 134)

		Section 13.	3	Section 134				
Nature of Work	No. of out- workers in August list required by Section 133	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-whole-some premises	Notices served	Prosecu- tions		
(1)	(1) (c) (2)	(3)	(4)	(5)	(6)	(7)		
Wearing apparel (making, etc.)	35							
Total	35	-	_			_		

Offices, Shops and Railway Premises Act, 1963

During the year the Public Health Inspectors made 1,740 visits to premises registerable under the Act. This piece of legislation seldom receives a great deal of publicity but its enforcement is an important part of the Health Department's work. There were 23,166 persons working in the premises registered at 31st December, 1969, so it can be said that approximately 15% of the Town's population rely on the provisions of the Act for the maintenance of acceptable working conditions.

There were 2,644 premises on the register at the end of the year, as follows:—

Offices	• •	• •					 	990
Retail Shops							 	1,460
Wholesale Sho	ps and	Warel	nouses				 	68
Catering Estab	lishme	nts ope	en to p	ublic,	Canteer	ns	 	145
Fuel Storage I	epots						 	1

712 premises received a general inspection in the course of the year and as a result the following measures were carried out to improve working conditions and welfare provisions:—

Means of heating provided		 	 	 29
Thermometers provided	• •	 	 	 76
Ventilation improved		 	 	 37
Lighting improved		 	 	 53

Sanitary Accommodation

New water-closets pro	ovided	i		 	 	1
Intervening ventilated	l space	e provi	ded	 	 	3
Cleansing carried out				 	 	43
Other works done				 	 	61

Washing Facilities

New wash-hand basins provided				 • •	9
Hot water provided				 	14
Cold water provided				 	27
Drinking water provided				 	3
Drinking vessels provided				 	1
First-aid Boxes provided or re-stock	ed			 	160
Meal rooms provided				 	1
Abstracts posted			• •	 	118
Other contraventions remedied	• •		• •		241
communications remodeled		4 .		 	471

Accidents

There were 64 accidents reported, none fatal, which may be classified as follows:—

No. of accidents affecting men			29
No. of accidents affecting women			29
No. of accidents affecting boys			4
No. of accidents affecting girls			2
	•	•	
No. of accidents occuring in offices			5
No. of accidents occuring in retail shops	• •		37
No. of accidents in wholesale shops		• •	5
No. of accidents in catering establishmen		• •	17
1 to: of decidents in edicting establishmen		• •	1 /
No. of accidents involving machinery			5
No. of accidents involving hand tools	• •	• •	
	• •	• •	4
No. of accidents as a result of falls	• •	• •	23
No. of accidents as a result of collision			9
	of goo	ds	14
No. of accidents involving vehicles			3
No. of accidents involving falling objects			1
Miscellaneous			5

Shops Acts

312 visits to shops were made by the Public Health Inspectors to ensure compliance with the provisions of the Shops Acts and the Young Persons Employment Act. 11 contraventions were detected which were remedied after informal action.

During the year the Council exercised its powers under the Shops Act, 1950 and made various Orders as follows:—

- Section 42. Changing the closing hours in connection with the Bournemouth Hotel and Catering Exhibition.
- Section 51. Permitting trading on 18 Sundays in respect of the sale of:—
 - (a) any article required for the purpose of bathing or fishing;
 - (b) photographic requisites;
 - (c) toys, souvenirs and fancy goods;
 - (d) books, stationery, photographs, reproductions and post-cards.
- Section 51. Permitting the sale of fried fish and chips from fried fish and chip shops on 18 Sundays.
- Section 3. Changing the "late day" for all shops in the Borough from Saturday to Friday.
- Section 1. Permitting six-day trading at a Departmental Store.

INFECTIOUS DISEASES

703 visits were made in connection with cases of infectious disease; 387 of these visits were necessary to fully investigate reports of cases of suspected food poisoning.

Disinfection of premises was carried out by the Public Health Inspectors' assistants as follows:—

			N	o. of room	ms
	After notifiable disease	 		14	
	After non-notifiable disease	 • •		10	
(c)	After Tuberculosis	 		3	

General Environmental Conditions

Drainage

The following table sets out the drainage work carried out during the year. The increase in the amount of this type of work revealed in the report for 1968 and made possible by the re-organisation of the non-technical staff was maintained.

No. of visits in connection with defective and		
choked drains	1,078	
No. of choked drains found and cleared	200	
No. of defective drains repaired	33	
No. of visits in connection with Private Sanitary		
Surveys	23	
No. of Private Sanitary Surveys carried out	12	
Total of fees received for Private Sanitary Surveys	£63.	0. 0d.

Refuse Storage Accommodation

337 visits were made by the Inspectorate in connection with the storage of refuse. 52 new dustbins were provided following informal approaches by the Inspectors.

Nuisances

1,095 complaints were received and dealt with in 1969. This compares with a total of 836 in 1968 and 670 in 1967. It is interesting to note that, for the first time, the number of complaints referring specifically to housing defects has fallen below that relating to other environmental matters, such as noise, smoke, accumulations and the unsatisfactory keeping of animals. This may be a reflection of a greater reluctance on the part of the public to accept unsatisfactory environmental circumstances.

Traditionally the abatement of nuisances is a prime function of the Public Health Inspector and, although the type of nuisance may have changed, the charts hereunder clearly show that the abatement of nuisance remains an important part of the Inspector's duties.

Nuisances arising from Housing Defects

Number of defects found in houses		528
Number of verbal notices given		46
Number of verbal notices complied with		10
Number of written informal notices served		192
Number of written informal notices complied	with	211
Number of formal notices served		37
Number of formal notices complied with		35
Total defects remedied		510

Other Nuisances

Number	of other nuisances found		22
Number	of written informal notices given		13
Number	of written informal notices complied	with	12
	of formal notices served		4
	of formal notices complied with		6

Defects Remedied

Water-closets repaired			 	44
Eaves gutters repaired			 	59
Rainwater or waste-pipes	repair	ed	 	69
Roofs repaired			 	67
Dampness remedied			 	97
Walls repaired			 	69
Floors repaired			 	45
Windows repaired			 	94
Other repairs executed			 	268
Accumulations removed			 	68

Insect Pests

The work of disinfestation, carried out by the Public Health Inspectors' assistants is mainly concerned with the elimination of cockroaches and the destruction of wasps' nests. Infrequently, action is required to deal with flea infestation whilst bed bugs present no problem in the Borough.

Infestations of cockroaches can now be treated using a wide range of insecticides in the form of liquid, powder or smoke or embodied in lacquer paint. Effective results have been achieved in many premises, including Corporation establishments.

During the year 136 wasps' nests were destroyed, almost double the total of 72 destroyed in 1968. A fixed charge of 10/- is made for the destruction of a wasps' nest.

Rodent Control

The work of rodent control is arranged to achieve two aims; the eradication of known infestations and the prevention of infestation.

The Department again received excellent co-operation from the general public in this field and 2,242 complaints were received, more often than not, immediately after the complainant had seen the first rat or suspected that rats might be present. This attitude is most helpful since speed in dealing with minor infestations is essential to prevent the establishment of large rat colonies.

In addition to dealing with complaints, which enabled the Department to eliminate 1,365 minor rat and 35 mice infestations, 2,400

premises were surveyed to detect infestations of which occupiers were unaware and to draw attention to conditions which might provide harbourage for rodents. As a result of this work a further 274 rat and 2 mice infestations were detected and dealt with.

Treatment to eradicate rats in domestic premises is carried out free whilst a charge is made when business premises are involved. A sum of £135 was derived from this source during 1969.

Animal Health Pet Animals Act, 1951

24 annual licences to conduct pet shops were granted to comply with the requirements of the Act. 36 routine inspections were made to pet shops to ensure that acceptable standards were maintained. 23 samples of raw pet meat were submitted to the Public Health Laboratory for bacteriological examination.

Animal Boarding Establishments Act, 1963

Only 3 premises are licensed as animal boarding establishments and are chiefly used for the temporary accommodation of cats.

Riding Establishments Act, 1964

There are no establishments in the Borough which are properly registerable under this Act.

Diseases of Animals (Waste Foods) Order, 1957

There are 21 persons licensed under this Order for the boiling of swill for animal feeding purposes. Most of the plants are associated with pig-keeping businesses. 76 routine inspections were carried out in the course of the year to check on conditions existing.

From time to time, in connection with the Council's responibilities for premises where animals are kept, matters arise where qualified Veterinary advice is desirable. The Council have therefore appointed, on a fee paying basis, two local veterinary surgeons who have agreed to act for the Council when necessary.

Public Swimming Baths

During July, 1969 Kinson public swimming pool was opened and there are now four public baths in the town. The baths at Stokewood Road and the Pier approach, like Kinson, are owned by the Council, whilst Linden Hall is in private ownership. The waters of all the baths are treated using the continuous filtration and chlorination method of purification.

118 samples of water were taken from public baths during the year and results were consistently good.

Private Swimming Pools and Paddling Pools

Every year which passes sees an increase, not only in the number of swimming baths provided at our schools but also in the number of hotels which seek to provide this additional amenity for residents and guests. It has been the practice for some years to take regular routine samples of water from both school baths and private pools in hotels even though the Council has no clear statutory power to control conditions at privately owned baths not open to the general public.

It may be necessary to reconsider this policy so far as it relates to hotel pools if numbers continue to increase. Much of this type of sampling is carried out during the summer season when the pressure of work on qualified staff is likely to be at its greatest. It will be necessary to consider if the time spent by Inspectorial and Laboratory staff in sampling at the present level is justified having regard to the risks to public health involved and the possible call on professional services for other essential environmental health responsibilities.

During the year 266 samples of water were taken from school and hotel swimming pools.

The water in the town's paddling pools is also sampled as part of the routine programme and this provides a useful guide to the bacteriological contamination of such pools.

Hairdressing Establishments

222 visits to hairdressing establishments were made to ensure that the requirements of the Byelaws were observed. Only 5 contraventions were noted and dealt with by informal action.

There are 183 registered hairdressers conducting their businesses from registered premises, whilst a further 66 persons are designated as "travelling hairdressers".

Sale of Poisons

There are 128 traders, mostly ironmongers and grocers, included in the Council's List of persons entitled to sell poisons scheduled in Part II of the Poisons List. 51 visits were made during the year in connection with such sales.

Public Conveniences

The Council owns 186 public conveniences of which 166 are administered by the Health Department.

Two new conveniences were opened at Firbank Road during the course of the year and this brought to a satisfactory conclusion the Council's efforts over some years to provide additional facilities in the Charminster Road area.

The effects of decimilisation on the service were considered by the appropriate Committees and it was decided to increase the charge for the use of water-closets to one new penny but to provide a proportion of free accommodation in each convenience in the town. This decision means that, after February 1971, there will be no charge made for the use of water-closets at many of the Council's smaller buildings. It is anticipated that the Council's early consideration and clear guidance will facilitate the smooth conversion to decimal currency so far as it affects public conveniences.

The submission of a report reviewing the public convenience service gave rise to certain resolutions by the Council. It was decided to continue with the installation of washing facilities and to improve conveniences, where possible, to assist handicapped users.

The receipts from public conveniences under Health Department control during 1969 were as follows:—

Source		A	mo	unt
		£	S.	d.
Coin locks	 	 14,509	0	4
Wash and brush up rooms	 • •	 372	16	10

Legal Proceedings

The following legal proceedings were taken in 1969:

Proceedings under	For	Result
Section 93, Public Health Act, 1936.	Non-compliance with Abatement Notice.	Nuisance Order made.
Food Hygiene (General) Regulations 1960.	Smoking in a food room.	Case dismissed.
Section 2, Food and Drugs Act, 1955	Cigarette end in a bottle of milk.	Fine £15.
Section 2, Food and Drugs Act, 1955.	Wire in a bottle of milk.	Fine £15
Section 2, Food and Drugs Act, 1955.	Adulterated gin.	Fine £50.
Sections 15 and 16 Housing Act, 1961.	Non-compliance with notices requiring. execution of works and provision of means of escape in case of fire.	Fine £10 on each count.
Section 15 and 16 Housing Act 1961.	Non-compliance with notices requiring execution of works and provision of means of escape in case of fire.	Fine £30 in respect of Notice under Section 16. Case in respect of Section 15 notice adjourned.

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Food Supply, Control	of								75
reed supply, control		•	• •	•			• •		
General Environmenta	ll Con	ditio	ns						92
a 1 a	• •								11
Seneral Statistics	• •	• •	• •	• •			• •		
Hairdressing Establish	mants								95
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Health Education		• •		• •	• •	• •		• •	
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Maternal Mortality					• •				13
Maternity and Child									5, 22
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Mental Health Service									6, 55
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COUNTY BOROUGH OF BOURNEMOUTH

EDUCATION COMMITTEE

Annual Report

of the

Principal School Medical Officer

Year 1969

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my sixteenth Annual Report as Principal School Medical Officer to the Education Committee, the sixty-second in a series dealing with the health of the children attending your schools.

There is little need to comment on the general health of the children, which has remained uniformly good, but the same problems of increasing dental caries, emotional disturbance and difficulty in obtaining Special School places remain unchanged and indicate some of the main lines for further effort.

A further change is to be made in the system of school medical examinations, in that selective examination will be extended to the Leavers' age group and the routine medical examination of Entrants will be carried out either through the Infant Welfare Clinics as the final developmental assessment or alternatively in the School during the 6th year of life.

My thanks are due to all members of the School Health Service and to the Head Teachers of your schools for their willing co-operation.

I am,
Yours faithfully,
WILLIAM FIELDING

SCHOOL HEALTH SERVICE STAFF

(As at 31st December, 1969).

Principal School Medical Officer:

WILLIAM FIELDING, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal School Medical Officer:

JOHN G. MEADOWS, M.B., Ch.B., D.P.H.

School Medical Officers:

PAULINE K. KEATING, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H. (SENIOR)

J. J. PHILLIPS, M.B., Ch.B.

ANNETTE S. RAIKES, L.R.C.P., M.R.C.S.

Principal School Dental Officer:

MRS. M. B. REDFERN, L.D.S.

School Dental Officers:

F. E. LOCKWOOD, B.D.S.

J. M. B. LUDFORD, L.D.S.

Dental Surgery Assistants:

MISS H. ALLEN, MRS. J. B. BULLEN, MRS. C. A. FERRIS, MISS F. R. HICKMOTT

Consultant Children's Psychiatrist (Part-time):

*R. F. ZINNA, M.D. (Naples), DIP.PSYCH. (McGill), AMER.B.P.N.

Psycho-Therapist:

A. W. EDWARDS

Senior Educational Psychologist:

IAN R. FERGUSON, M.A., M.Ed.

Psychiatric Social Workers:

H. S. LOVEJOY

MISS B. HARRISON

Ophthalmic Surgeons (Part-time):

*R. B. de SARAM, M.B., B.S.(Lon), F.R.C.S., D.O.

*G. G. K. HOLDING-PARSONS, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.O. *RALPH F. JONES, M.B., B.S., F.R.C.S., D.O.

Orthoptist (Part-time):

*Miss A. P. Field, D.B.O.

A 4 Orthopaedic Surgeons (Part-time): *Services provided by Surgeons from the Royal Victoria Hospital, Boscombe. Physiotherapist-in-charge: *MRS. E. SIMPSON, M.C.S.P. Assistant Physiotherapists: *Mrs. H. Hughes, M.C.S.P. *Mrs. B. Wigmore, M.C.S.P. Senior Speech Therapist: MISS M. THOMAS Speech Therapists:

MISS M. MORAN MISS P. SHEA

Chief Nursing Officer:

MISS L. E. ROBERTS

Deputy Chief Nursing Officer for Health Visiting: MISS G. F. GRACE

Health Visitors and School Nurses:

MISS K. H. BEAUMONT.	MISS M. C. PARNHAM
MISS D. E. BLUNDSTONE	MISS M. PEAKMAN
Mrs. E. R. Bond	Mrs. J. Price
Mrs. M. Carley	MISS M. ROUTH
Mrs. D. M. Clark	MISS M. R. Y. SMITH
Miss F. Darlington	Miss G. D. Thomas
Mrs. B. Geach	Miss A. R. Thornton
MISS A. JOHNSON	Miss E. M. P. Ward
Mrs S. M. Money-Kyrle	Mrs. J. Wilkinson
MISS J. MULLIGAN	
Clerk in charge of School	ol Health Service Section

F. J. Goode Clerk:

J. W. PEAKE

*Employed by the Wessex Regional Hospital Board.

SCHOOLS AND SCHOLARS

Number of Primary Schools		• •	. 32
Number of Secondary Modern Schools .			. 10
Number of Secondary Grammar Schools	•	•	. 2
Number of Special Schools			. 3
Average attendance :			. 16,133
Average number on School Registers			. 17,423

A TABLE SHOWING THE NUMBER AND NATURE OF THE DEFECTS FOUND DURING EXAMINATION OF CHILDREN IN THE PRESCRIBED AGE-GROUPS AND OF OTHERS "PERIODICALLY INSPECTED"

DEFECTS	Children Aged 5 864		Children Aged 10 393		Children Aged 14 1157		Other Periodic Inspections 1,138	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin	34	17	15	3	54	2	42	• 100.000
Eyes :— (a) Vision (b) Squint (c) Other	10 38 14		62 1 5	<u>-</u> 19	214 6 4	<u>-</u> 15	127 37 7	$\frac{2}{6}$
Ears:— (a) Hearing (b) Otitis Media (c) Other	3 5 —	6 1 3	9 -3	1 	$-\frac{4}{1}$	1 - 1	5 1 2	4 - 2
Nose or Throat	9	145	10	21	6.	15	20	101
Speech	17	14	3	5	1	2	12	7
Glands		63		3	1	5	1	45
Heart		10	1	2	1	6		7
Lungs	3	13	3	1	2	4	11	7
Developmental:— (a) Hernia (b) Other	7 15	- 13	1 19	8	30	_	2	1 7
Orthopaedic:— (a) Posture (b) Feet (c) Other	7 17 3	18 14 3	4 9 3	4 3 —	11 14 4	17 3 3	7 34 4	18 4 3
Nervous System:— (a) Epilepsy (b) Other	_	1	 		1 1	<u> </u>	1	. —
Psychological:— (a) Development (b) Stability	2 4	37 7	17 7	9	2 5	3 7	27	2 8
Abdomen	3	6	1	1	_			1
Other					-		1	
	191	375	173	90	362	85	360	249

THE MEDICAL INSPECTION OF SCHOOL CHILDREN

During 1969, the established pattern of school medical inspections remained as before, with routine examinations for Entrants and Leavers and a selective examination in the Intermediate Group. Discussions between Officers, Committees and the Department of Education and Science have, however, now resulted in the proposal that from 1970 selective examination will be extended to include the Leaver group, while the routine Entrants' examination will be linked with the Developmental Assessment of Pre-school Children, and carried out either towards the end of the 5th or early in the 6th year of life. The advantages of the new system, with its concentration of effort on the children needing it most, should result in a clearer understanding of their medico-social and educational problems.

During 1969 the last of the Minor Ailment Clinics was finally abandoned, as attendances had declined to very small numbers.

FINDINGS ON MEDICAL INSPECTION

(a) Uncleanliness

41 cases of personal uncleanliness were discovered, including a few cases of infestation by lice. These cases tend to be grouped, and occur mainly among large "problem" families living under overcrowded conditions.

(b) General Physical Condition

Only 5 children seen in 3,552 routine medical examinations fell below the average standards of physique and build for their age groups. This is a remarkable tribute to the benefits of the Welfare State generally and to the ability of parents to put first things first.

(c) Defective Vision

11.6% of all children examined were found to be suffering from defective vision and were referred for further investigation either to the Special Eye Clinics or to the oculist of their parents' choice. Parental co-operation was extremely good, and of the 309 children attending the Eye Clinics for the first time 168 were recommended to wear spectacles.

52 new cases of squint attended the Orthoptic Clinic at 'Avebury' and 29 children had a corrective operation.

(d) Defects of the Nose and Throat

245 children received operative treatment for enlarged tonsils and adenoids, compared with 220 in 1968.

(e) Defective Hearing

The excellent arrangements previously described at the Hearing Assessment Clinic of the Poole Authority have continued to be available to Bournemouth schoolchildren, and during the year 10 children attended for assessment and at the end of the year 7 boys and 3 girls attended the Partially Hearing Unit.

(f) Treatment of Children in Hospital

The following information was given in hospital discharge reports received during the year:—

	Group of Diseases			No. of Children
1.	Infections or Parasitic Diseases	• •		 1
2.	Neoplasms (a) Benign		• •	
	(b) Malignant			
3.	Allergic, Endocrine, Metabolic and Nutritional			
4.	Diseases of blood and blood forming organs			 2
5.	Mental, Psychoneurotic			
6.	Diseases of Nervous System and Special Senses	• •		 58*
7.	Diseases of Circulatory System and Lymphatics			 2
8.	Diseases of Respiratory System		• •	 263†
9.	Diseases of Digestive System			 73
10.	Genito-Urinary System			 49
11.	Skin and Cellular Tissues			 10
12.	Bones, etc			 40
13.	Accidents, Poisoning and Violence			 72
	*Includes 29 operations for "squint".			

[†]Includes 245 cases for tonsillectomy.

There is extremely good co-operation between the Consultant Paediatrician and the School Health Service, and in the case of any child hospitalized for a lengthy period, special educational arrangements have been made through the Director of Education.

LIST OF CLINICS HELD FOR SCHOOL CHILDREN

	MONDAY	TUESDAY	WEDNESDAY THURSDAY	THURSDAY	FRIDAY
Dental Clinics Central: 10 Madeira Road	MORNING AND	Morning and	MORNING AND	MORNING AND	MORNING AND
East Howe: Hadow Road Pokesdown: 896 Christchurch Road Charminster: East Way	Do. Do. Do.	Do. Do.	Do. Do.	Do. Do.	Do. Do.
Eye Clinics Central: 10 Madeira Road Charminster: East Way West Howe: Cunningham Crescent	Morning —	111	— Morning	Morning	Morning —
Child Guidance Centre 844 Wimborne Road	Morning and Afternoon	Morning and Afternoon	Morning and Afternoon	Morning and Afternoon	Morning and Afternoon
Speech Therapy Clinics Charminster: 468 Charminster Road	MORNING AND AFTERNOON		1		
Pokesdown: 896 Christchurch Road	Morning and Afternoon	Morning	AFTERNOON	MORNING	Property
Avebury: 10 Madeira Road East Howe: Hadow Road Pelhams: Millhams Road, Kinson		Morning			Morning — Morning
Stewart Road West Howe: Cunningham Crescent Winton & Moordown: 844 Wimborne Rd.	AFTERNOON —			Morning Morning and Afternoon	AFTERNOON

Children's Orthopaedic Clinic, 70 Stewart Road .. Surgeon's sessions — Friday Mornings. Physiotherapy — daily by appointment.

ORTHOPAEDICS

Weekly orthopaedic clinics continued at Stewart Road under the supervision of the Consultant Orthopaedic Surgeon of the Bournemouth and East Dorset Hospital Management Committee, and a continuous physiotherapy service was available during the week.

As this is primarily a hospital clinic, not all the children attended local authority schools, though a high proportion do so, and it has the great advantage that appointment delays are minimal and physiotherapy is immediately available.

As before, the majority of defects concerned the feet and knees, together with some postural defects, and the attendances were as follows:—

Number of scholars seen by the surgeons		528
Number of new cases		149
Total number of attendances		806
Number of cases discharged	• •	152
Defects found:		
Genu Valgum/Genu Varum and other knee defects	• •	168
Spastic conditions		3
Deformities of the foot		230
Other conditions		127
Physiotherapy attendances totalled 8,663.	*	

SPEECH THERAPY

Defective speech has continued to be one of the commonest forms of handicap among schoolchildren, and the following statistics have been provided by Miss M. Thomas, Senior Speech Therapist:—

Number of children on register 1.1.69	278
Number of new cases during 1969	147
Number of discharges during 1969	144
Number of children on register 31.12.69	281
Total children treated during 1969	425

B.C.G. VACCINATION

During 1969 children of 11 years of age and above were offered B.C.G. vaccination against tuberculosis as recommended by the Department of Health and Social Security. By the end of the year, 682 children had been Heaf tested; of these 653 were found to be lacking protection against the disease and were therefore vaccinated.

CHILD AND FAMILY GUIDANCE CENTRE

I am indebted to Mr. Ian R. Ferguson, M.A., M.Ed., Senior Educational Psychologist, for the following information:—

Staffing

On 19th May we welcomed Dr. R. F. Zinna, M.D.(Naples), Dip. Psych.(McGill), Amer.B.P.N., who was appointed by the Wessex Regional Hospital Board as Consultant Children's Psychiatrist to the Centre in place of Dr. Jeannie S. Stirrat. Dr. Stirrat, in order to provide continuity and maintain her link between the Centre and her continuing work in the Paediatric Department at Poole General Hospital, from then on devoted one session per week to liaison with the Staff of the Centre. Dr. Zinna obtained his qualifications in Psychiatry in Canada and U.S.A. and recently returned to England from a post in Vermont. Bournemouth Centre shares Dr. Zinna's time with neighbouring authorities. responsibilities include two sessions a week at the Poole Child Guidance Clinic, two sessions serving the Christchurch and New Forest area of Hampshire, and one session for the Hospital Board, mainly at Capesthorne Convalescent Home, Mudeford. Of his six Bournemouth sessions. Dr. Zinna has found it most practical to devote one per week to the Bicknell School and half a session to Westbourne Day School, leaving four and a half per week for work at the Centre.

Miss M. Hergett was accepted for a year's course of professional training in Educational Psychology at Birmingham University, leading to a Diploma in Educational Psychology. She commenced the course at the end of September, being seconded on salary by the Education Committee. In view of the unlikelihood of finding a temporary psychologist, and also for reasons of economy, no attempt was made to find a temporary substitute, so that an increased burden fell on myself as Senior Educational Psychologist.

On the Social work side, in spite of continued advertising, no suitable candidates were found for permanent appointment to the two full-time and one half-time posts which have remained vacant since 1966, (one of these is, of course, actually a post for a Consultant Case Worker in the School Psychological Service). In an attempt to relieve the intolerable pressure which this state of affairs places on Miss B. Harrison, our Senior Social Worker and sole P.S.W., Miss L. Frenkel, a South African who was available for 6 months prior to returning to her own country, was appointed in October for 5½ months to the vacant full-time P.S.W. post. It was envisaged that, although Miss Frenkel was not fully qualified by British standards, she would be able to relieve Miss Harrison of a proportion of the work, and also that an appointment of this duration would not prejudice unduly the chances of finding a suitable permanent appointee.

In the last decade, there has been a somewhat fluctuating but persistent rise in the number of new cases actually seen at the Centre from 112 in 1960 to 256 in 1969. It is anticipated that numbers will continue to rise. In 1964, when there were 200 new cases and the complement of staff was otherwise much the same as at present, Dr. Stirrat had 8 sessions per week at the Centre and in addition a clinical assistant provided one further session per week on the psychiatric side, while in 1969, even including Dr. Stirrat's liaison session, Dr. Zinna and she have only six sessions at the Centre (including Westbourne). There is thus a net loss of three sessions per week at the Centre as compared with 1964. The Bicknell School has since been founded and Dr. Zinna has a session there each week, but it should be pointed out that fewer than a third of the boys he i:responsible for there are from Bournemouth, and also that the Regional Hospital Board agreed in principle when the School started to the provision of two psychiatric sessions per week to cater for the needs of the School.

Increasing work for the Educational Psychologists, both at the Centre and with regard to their School Psychological Service duties, make the establishment of a third Educational Psychologist's post something which will need consideration in the near future.

The urgent present need is, however, to find appropriately qualified Psychiatric Social Workers. It is impossible for Miss Harrison to continue to cope with the present demands her job makes on her time and energies, and any increase in psychiatric or

psychologist's time will not be utilised effectively until the social work vacancies are filled. It is now apparent that urgent consideration requires to be given to the question of seconding on salary suitable applicants to complete their training as P.S.Ws., this being the likeliest way in the long run of making appointments.

Cases

The number of children referred in 1969 (291) showed an increase of 32 over the previous year and of 54 over the referrals in 1967. By December 31st the number of cases awaiting preliminary investigation rose substantially to 38, and a further 17 were awaiting psychiatric investigation. For an increasing number of the less urgent cases, this represents a waiting list of three months or more between referral and a first appointment being offered. Resources are now so strained that interviews tend to become shorter, help is not offered at the time of greatest need and reviews, of necessity, become less frequent and the chance to build up a real and supportive relationship with clients is diminished. As numbers rise, the quality of the service that the Centre can provide is liable to further deterioration until the staffing position has improved substantially.

The following points are of interest concerning the referrals in 1969:—

There was a rise in the number of cases referred by General Practitioners from 50 to 71, as compared with the previous year. Combining figures for Secondary Bilateral and Grammar schools with those who had left school, there was a rise in the number of adolescents referred from 92 to 131, while there was little change in the number of pre-school and primary children referred. The number of pupils referred for behaviour difficulties (always the most numerous category) showed an increase of 27 over the previous year.

Training

A student from Swansea University Education Department was accepted in February for four weeks' field-work placement in Bournemouth. She was in her final year of professional training as an Educational Psychologist. In view of the staffing position, however, it was not possible to resume participation in the field-work training of Social Workers from the Applied Social Studies Course at Southampton University. This assistance was discontinued with regret in 1968. It was decided also that staff from the Centre could not contribute lecturers to the second in-service

training course for residential child care staff, organised by Dorset Children's Department.

Liaison with Schools for Maladjusted Children

Members of the Clinic team continued to visit Westbourne School, as in previous years, to discuss day-to-day problems concerning the pupils there and to re-assess their abilities and attainments. Dr. Zinna and Miss Harrison visited weekly and in some instances participated in interviews with the children's parents at Westbourne. Mr. A. W. Edwards, our psychotherapist, saw some of his patients there for a time, but discontinued this, preferring to see the children in the therapy room at the Centre.

Close contact continued with the Bicknell School, Dr. Zinna visiting on a weekly basis to see pupils and discuss problems with the staff. After Miss Hergett's departure on her course in September, the Psychologist's visits to Westbourne and the Bicknell School were reduced to one a fortnight at each school.

Liaison with Children's Department

1969 has been a year of increasing contact with Bournemouth Children's Department — partly because of the developing responsibilities of the Department for children 'at risk' and those who come before the Juvenile Court. In addition to day-to-day contacts concerning the considerable number of families and children known to both agencies, meetings at approximately three-monthly intervals were inaugurated in October to discuss cases and facilitate communication between the two services.

Christchurch Child and Family Guidance Clinic

During the year an arrangement was made between Hampshire's School Medical Department and Bournemouth's Education Department to enable the Christchurch Child and Family Guidance Clinic to be offered temporary accommodation for an administrative base at 844 Wimborne Road until a new Health Centre is built in Christchurch, or until the staffing situation in Bournemouth makes it necessary to terminate the arrangement. At the beginning of November, therefore, a part-time secretary was appointed by Hampshire and two rooms made available for the Secretary and P.S.W., Mrs. Casswell. The arrangement is particularly advantageous to the Christchurch Clinic in that Dr. Zinna is also psychiatrist for the Christchurch area and contact with his Hampshire colleagues is thus made much easier.

CHILD AND FAMILY GUIDANCE CENTRE

Annual Report

31st December, 1969

Year 1969							
New Cases referred							291
New Cases seen (including re	e-opened	cases)					256
Uneventuated							34
Cases Closed							207
Cases Re-opened						• •	52
Total number of children see	en						380
At 31.12.69							
Open Cases							374
Awaiting preliminary investig							38
Awaiting Psychiatric investig	ation	• •					17
$C \sim C \sim C \sim C$							
Source of Referrals							40
School Medical Officers .	• • •	• •	• •	• •	• •	• •	42
General Practitioners .	• • •	• •	• •	• •	• •	• •	71
Head Teachers	• • •	• •	• •	• •	• •	• •	47
Parents	• • •	• •	• •	• •	• •	• •	37
Consultants		• •	• •	• •	• •	• •	15
Drobation Officers		• •	• •	• •	• •	• •	19 7
		• •	• •	• •	• •	• •	•
School Psychological Service Juvenile Court		• •	• •	• •	• •	• •	16 11
Missellaneaus		• •	• •	• •	• •	• •	26
wiscenaneous	• • •	• •	• •	• •	• •	• •	20
							291
Age Group of Referrals							20
Pre-school		• •			• •	• •	30
Primary		• •	• •	• •	• •		130
Secondary		• •	• •	• •	• •	• •	107
Grammar		• •	• •	• •	• •		13
Left School		• •	• •	• •	• •		11
							201
							291
Reasons for Referrals							
Dohaviour difficulties				• •			206
Psychosomatic symptoms .		• •	• •				26
Educational problems .		• •			• •		22
Nervous symptoms		• •		• •			31
Speech problems							6
							291
Closures							
Improved by treatment .							66
Parents unable to co-operate							13
Not responsive to treatment							9
Advice only							40
Left school						• •	27
Transferred to other agencie		• •					31
Removed from area							4
Satisfactory							6
Court Report only		• •					11
Court Report only	•	•	•				
							207

IMMUNISATION AGAINST INFECTIOUS DISEASES

Arrangements have continued for the protection of school children against diphtheria, whooping cough, tetanus, poliomyelitis, smallpox and tuberculosis in accordance with the schedule recommended by the Department of Health and Social Security. Since the middle of 1968, as a result of recommendations made by the Joint Committee on Vaccination and Immunisation, the Department of Health and Social Security has made measles vaccination available to all children up to and including the age of 15 years who were susceptible to measles because they had neither been immunised nor had the disease. As a result of this scheme, a further 188 school children were given measles vaccination during 1969 either by general practitioners or at school. The majority of school children had, of course, received this vaccination early in the campaign in 1968.

During the year, protection was given as follows:—

		Primary	Booster
Diphtheria	nus (Triple) .	. 4 . 37 . 16 . 42	0 1337 2 826 2050 160

B.C.G. vaccination against tuberculosis was given to 653 school children in addition to 16 others dealt with as contacts.

NOTIFICATION OF INFECTIOUS DISEASES

The following relate to school children:—

Measles	• •			 	46
Whooping	Cough			 	4
Scarlet Feve	er	• •		 	11
Food Poiso	ning	• •		 	2
Scabies		• •	• •	 	20
Dysentery		• •		 	1

84

There were no notifications of tuberculosis.

FOLLOWING UP

Most valuable work is done by the school nurses in the general follow-up of children found to have defects or who have recently been ill. By home visits the nurse is able to give helpful advice to the parents and can satisfy herself that treatment has been sought from the general practitioner and his advice carried out.

The School Nurses recorded the following reasons for home visits:—

)1
)5
48
36
49
39
2

Exclusion from School

7 scholars were excluded from school during 1969 for uncleanliness and 2 because of behaviour problems.

Open Air Education

Two boys were recommended for admission to a residential open air school during 1969.

SCHOOL MEALS SERVICE

37 Centres are in use for the provision of meals and the number of children attending on an average day in October was 11,782 out of 16,534 children attending school that day. 1,256 of these meals were provided free. On the same day 8,502 children received milk in school (one-third pint each).

STAFF EXAMINATIONS

63 lecturers and school teachers were examined by the medical staff, as a condition of appointment, and 121 applicants for entry to Training Colleges.

EMPLOYMENT OF SCHOOL CHILDREN

A total of 476 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. All, except one, were considered to be fit. The occupations proposed were :—

Errand boys · ·	 			14
News boys	 			304
News girls	 	• •		129
Shop assistants	 		• •	20
Other	 			8

7 other children were granted medical certificates as being fit to take part in public entertainment.

HANDICAPPED CHILDREN

There was a small reduction in the number of handicapped pupils, 646 compared with 665 in 1968, with speech defects, educational subnormality and maladjustment accounting for nearly 88% of the total. The numbers of maladjusted children continue to increase, being three times what there were 10 years ago and over double what they were 5 years ago, and this is not only a serious problem in itself, but throws an increasing strain on the resources of special education. There were, in fact, 10 maladjusted children awaiting placement in Special Schools at the end of the year.

The Handicapped Children's Review Panel has continued to meet at monthly intervals throughout the year.

HANDICAPPED PUPILS

	er ng snt 0		
	Number awaiting placement 22.1.70	1	15
chools*	Number attending 22.1.70	25 3 4 121 91 1	253
Special Schools*	Number admitted during the year	1 1 25 25 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	61
	Number recommended during the year for admission	1 2 5 15 40	63
inment	Number on Register, 31.12.69	2 6 25 112 30 180 106	646
Ascertainment	New cases ascertained during 1969		215
			:
			•
	<u>></u>	: : : : : : : : : : : : : : : : : : : :	•
	Category	 apped -norm:	•
		Blind	:
		Blind	
		Blind Partially Deaf Partially Delicate Physicall Educatio Maladjus Epileptic Speech D	Totals

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944 * Includes boarding houses or hostels and independent schools: excludes Hospital Schools.

26

Report by Mrs. M. B. Redfern, L.D.S., Principal School Dental Officer

During 1969 the School Dental Service was once more beset by shortages. The Pokesdown Clinic was again without a Dental Officer for the first three months of the year but with the appointment of two part-time dental officers the clinic is now functioning smoothly with nine sessions per week. East Way Clinic also suffered a further change in September, but with the appointment of a full-time dental officer towards the end of the year it is hoped that there will be no further changes for some considerable time as frequent staff changes are very disturbing for child patients. Children take time to establish the close bond that is essential to gain their confidence and without this they will not readily accept regular treatment.

Because of the staff shortage it was again not possible to carry out dental inspections in all schools. Although a majority of school children now obtain treatment through the General Dental Service the need for the School Dental Inspection remains as great as ever. Most five-year-old school entrants have not started regular visits to the dentist and the state of the mouths of many children in the reception classes is deplorable. There is also a considerable inflow of children from other areas who have not had regular treatment in the past and there is a large number of school children who do not seek treatment except when they are reminded of the need to do so following a School Dental Inspection.

The number of children found to be caries free has increased slightly but these children are mainly in the younger age groups and the number of caries free children of secondary school age continues to decline.

The demand for treatment continues to increase and it is a great credit to the devotion of the dental staff that waiting time is kept to a minimum and any child in pain is seen immediately. There is a steadily increasing demand for orthodontic treatment and, of the 597 permanent teeth extracted, 528 were planned extractions to relieve over-crowding; carefully timed extractions often eliminating the need to fit orthodontic appliances.

The Mobile Dental Clinic has continued to prove useful and the number of children requesting treatment when it is carried out on the school premises reflects the very real need for this service. It is of particular benefit where mothers are out at work all day and are unable to take a child for treatment to either a fixed clinic or surgery. 155 sessions were worked in the Mobile Clinic and it was in almost constant use during term time, but due to the demands for treatment it has not been possible to visit every school equipped to use the Mobile Clinic. I am grateful to the ambulance personnel who tow and service the caravan and to the Health Department plumbers who connect and disconnect services each time the caravan is moved.

Dental Health Education

Due to pressure of demand for clinical treatment, less than a dozen sessions were devoted to Dental Health Education by dental officers and this is to be regretted, although much useful work in educating patients is carried out at the chair-side, during treatment. The Health Education Officer conducted two Dental Health film campaigns in First Schools during March and November.

I am glad to note that almost all schools have ceased the sale of caries-causing foods and instead are selling crisps, nuts and raisins. Eight schools began selling apples and as this scheme has proved successful I hope that more schools will follow suit next autumn.

Finally I should like to thank all members of the dental and medical staff for their loyalty and co-operation in every way. I am also grateful to the Head Teachers and staff of all our schools, to the Chief Nursing Officer and her staff, the clerical staff and the Consultants and staff of the hospital for the facilities they provide.

Medical Inspection and Treatment

Return for Year ended 31st December, 1969

Number of pupils on registers of maintained primary, secondary, special and nursery schools in January 1970:

				 9	
(i)	Form	7 Schools	• •	 	 17,755
(ii)	Form	7M		 	 191
		11 Schools		 	
\ /			OTAL		17.946

PART 1

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A—PERIODIC MEDICAL INSPECTIONS

	f	1	
nent (exclud- station with	Total individual pupils	(8)	156 111 22 9 20 106 44 35 21 35 37
Pupils found to require treatment (excluding dental diseases and infestation with vermin)	for any other condition recorded at Part 2	(7)	181 110 21 8 8 19 79 32 21 115 115 169
Pupils found ing dental d	for defective vision (excluding squint)	(9)	10 9 6 7 7 7 44 118 119 119 266
No. of Pupils found not to	warrant a medical examination	(5)	672 342
Condition	Unsatisfactory No.	(4)	
Physical Condition of Pupils Inspected	Satisfactory No.	(3)	\$64 \$28 116 34 38 266 127 85 75 88 1,321
No. of Pupils who have	received a full medical examination	(2)	\$64 \$28 \$116 \$34 \$38 \$266 \$127 \$86 \$76 \$89 \$1,323
Age Groups	inspected (By year of Birth)	(1)	1965 and later 1964 1963 1962 1961 1950 1958 1957 1956 1955 1955 1955 and earlier Toral

Col. (3) total as a percentage of Col. (2) total 99.86%

Col. (4) total as a percentage of Col. (2) total 0.14%

TABLE B — OTHER INSPECTIONS

Number of Special Inspections					960
Number of Re-inspections					10
	Total				970
TABLE C — INFE	STATION V	VITH	VERM	IN	
(a) Total number of examinations	of pupils in	schools	s by sc	hool	
nurses or other authorised pers					26,155
(b) Total number of individual pur	oils found to	be infe	sted		41
(c) Number of individual pupils				ising	
notices were issued (Section 54)					NIL
(d) Number of individual pupils				ising	
orders were issued (Section 54(3), Education	Act, 1	944)		NIL

PART II.— DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS DURING THE YEAR

Defect Code	Defect or Disease			Periodic I	nspections		Special Inspec-
No. (1)	(2)		Entrants	Leavers	Others	Total	tions
4		<u> </u>	34	54	57	145	5
- •		Ô	17	2	3	22	<i>—</i>
5		T	10	214	189 2	413	25
	(b) Squint	T	38	6	38	82	13
	(c) Other	O T O	14 4	4 15	12 25	30 44	2 4
6	\ /	T	3	4	14	21	11
	(b) Otitis Media	O T	6 5 1		5 1	12	3
	(c) Other	O T	_	1 1	5 2	1 6	1
		0	3			6	
7		T O	9 145	6 15	30 122	45 282	8 14
8		T O	17 14	1 2	15 12	33 28	4 3
9		T O	63	1 5	1 48	2 116	1 4
10	Heart	T O	10	1 6	1 9	2 25	2 5
11	Lungs	T	3 13	2 4	14 8	19 25	1 3
12	Developmental—: (a) Hernia	Т	7		3	10	_
	` ′	O T O	15 13	30	1 30 15	1 75 28	5
13	Orthopaedic:— (a) Posture	T	7 18	11 17	11 22	29 57	4 2
	(b) Feet	O T	17	14	43	74 24	10
	(c) Other	O T O	14 3 3	3 4 3	7 7 3	14 9	4 2 10 5 2 1
			Ł	I	1		1

T = Defects found to require treatment.

O = Defects requiring observation only.

Defect (Code	Defect or Disease		Periodic Inspections					
No. (1)	(2)	Entrants	Leavers	Others	Total	Inspec- tions		
14	Nervous System :— (a) Epilepsy T		1	1	2	1		
	(b) Other T	1	1 1	2	1 4			
15	Psychological:— (a) Development T O	2 37	2 3	44 37	48 77	6		
	(b) Stability T	4 7	2 3 5 7	15 14	24 28	4 5 4		
16	Abdomen T	3 6		1 2	4 8			
17	Other T	_	_	1	1	2		

T = Defects found to require treatment. O = Defects requiring observation only.

PART III

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A — EYE DISEASES, DEFECTIVE VISION AND SQUINT

		of cases known been dealt with
External and other, excluding errors refraction and squint		3
Errors of refraction (including squint)		1,088
Total		1,091
Number of pupils for whom spectac	eles	

TABLE B — DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

Number of cases known to have been dealt with Received operative treatment:— 25

527

(a) for diseases of the ear	23
(b) for adenoids and chronic	
tonsillitis	245
(c) for other nose and throat	
conditions	18
	1
Received other forms of treatment	1
	200
Total	289
Total number of pupils in schools who	
are known to have been provided with	
hearing aids.	
() : 10(0	1
(a) in 1969	10
(b) in previous years	10

TABLE C - ORTHOPAEDIC AND POSTURAL DEFECTS

T

		Number known to have been treated
(a)	Pupils treated at clinics or out- patients departments Pupils treated at school for postural	528
(0)	defects	_
Total		528

TABLE D — DISEASES OF THE SKIN excluding uncleanliness, for which see TABLE C of Part I

			Number of pupils known to have been treated
Ringworm —	(a) Scalp		 Ammend
	(b) Body	 	 •
Scabies		 	 6-11-1-10-10-10-10-10-10-10-10-10-10-10-1
Impetigo		 	
Other skin di	seases	 • •	 73
Total		 	 73

TABLE E — CHILD GUIDANCE TREATMENT

Number known to have been treated

Pupils treated at Child Guidance clinics . . 350

TABLE F — SPEECH THERAPY

Number known to have been treated 425

Pupils treated by speech therapists .. 425

TABLE G — OTHER TREATMENT GIVEN

	Number known to have been dealt with
(a) Pupils with minor ailments	9
(b) Pupils who received convalescent treat-	
ment under School Health Service	
arrangements	NIL
(c) Pupils who received B.C.G. vaccination	669
(d) Other than (a), (b) and (c) above	NIL
Total (a)-(d)	678

SCHOOL DENTAL SERVICE

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR ENDED 31st DECEMBER, 1969.

1 ATTENDANCES & TREATMENT								
			Ages 5 to 9	1	Ages 10 to 14		es 15 over	Total
	First Visit	• •	1,155		1,038		307	2,500
	Subsequent Visits	• •	2,098		2,542		531	5,271
	Total Visits Additional courses of treatn	 nent	3,253		3,580	5	38	7,771
		··	313		170		63	546
	Fillings in permanent teeth		1,130		2,450	8	395	4,475
	Fillings in deciduous teeth		2,349		238		_	2,587
	Permanent teeth filled		930		2,186	8	304	3,920
	Deciduous teeth filled		2,176		234		_	2,410
	Permanent teeth extracted	• •	67		452		78	597
	Deciduous teeth extracted	• •	927		341			1,268
	General anaesthetics		241		137		12	390
	Emergencies	• •	246		136		38	420
	Number of Pupils X-rayed	• •	• •	• •	• •	• •	• •	298 706
	Prophylaxis Teeth otherwise conserved	• •	• •		• •	• •	• •	391
	Number of teeth root-filled		• •		• •			52
	Inlays		• •					2
	Crowns							18
	Courses of treatment comple	_						2,776
2	ORTHODONTICS		••					61
	Cases remaining from previo			• •	• •		• •	61 58
	New cases commenced durin Cases completed during year		• •		• •		• •	28
	Cases discontinued during year			• •		• •	• •	19
	Number of removable applia							96
	Number of fixed appliances f							programme
	Pupils referred to Hospital C		ant		• •			54
_	0 cm		<i>~</i> 0		10 / 14	15	1	Total
3	PROSTHETICS	T7 T	5 to 9		10 to 14	15 an	d over	Total
	Pupils supplied with F.U. or							
	(first time) Pupils supplied with other	den.						
	tures (first time)				5		6	11
	Number of dentures supplied				5 5		8	13
	Trained of delitares supplies							
4	ANAESTHETICS	. 1	1 D	-1.0	· C			1
	General Anaesthetics admini	stered	by Dent	ai U	mcers	• •	• •	1
5	INSPECTIONS							
J	(a) First inspection at school	ol. Nu	mber of	Pup	ils			13,296
	(b) First inspection at clinic	. Nun	nber of I	Pupi	ls			937
	Number of (a) $+$ (b) for	and to	require	trea	tment			5,636
	Number of (a) $+$ (b) off	ered tr	eatment		• •			4,839
	(c) Pupils re-inspected at sc	hool o	r clinic			• •	• •	1,150
	Number of (c) found to	requir	e treatm	ent	• •	• •	• •	511
6	SESSIONS							
U	Sessions devoted to treatmen	t					• •	1,290
	Sessions devoted to treatment							122
	Sessions devoted to Dental H	Health	Education	on				11



